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LYONS MEDICAL, ELEVENTH YEAR VOL. XXI, June 22nd., 1879.

Epid emic of Vaccinal G landers.

"The following facts seem t o us too serious not to be made known immediately to our readers, for it is of a character to cool singularly the apostles of animal vaccination. The only advantage of this process of dissemination of vaccination is its supposed harmlessness. With the calf for vaccinifer, it was said, there is no danger of syphilis. Imbued with these ideas, a semi-official bureau was established at Rome for the distribution of vaccine in the surrounding country. Regarding the endorsement by the Prefecture of Rome as a Government guarantee, the Commune of San Quirico D'Orcia sent to Rome the sum of twenty francs, the price demanded for this precious vaccine. On the 22nd. April the Committee sent the tubes to San Quirico. They arrived there the 24th. On the 26th., 27th. and 28th. days of April the doctors of the district inoculated this vaccine upon 38 children of all ages from 20 months up. While awaiting the blossoming of the vaccinia pustules, the wretched doctors soon perceived that they had inoculated one of the most horrible of diseases, and that they were the involuntary authors of a veritable "massacre of the innocents."

There supervened erysipelatous erythemas at the points of inoculation with fever, then convuls ions followed these lesions. Up-on some were seen phagedenic ulc ers, cyanose of the extremities, rapid emaciation etc. One of the first victims of the epidemic was the niece of the royal syndic of the place; and to this we are indebted for a knowledge of the true facts. This exalted personage immediately caused an investigation. An autopsy of the victim was made. Experts and a Juge d'Instruction were convened. The reporter of these details went to San Quirico. He saw the victims; he saw vast phlegmons stripping the muscles and penetrating into the articulations accomp anied by symptoms of eclampsia. In his opinion it was very probab ly an epidemic of glanders. Without suspecting anything wrong the physicians of the district took vaccine matter from one of these children before the explosion of the general symptoms. They transmitted the same malady.

If it was really glanders # the responsibility of this epidemic must rest on the Roman Committee. It is not possible to excuse the experts who used a gla ndered cow as vaccinifer. If on the contrary it was any other malady, one of which the diagnosis was impossible, animal vaccination is not less singularly compromised."

(Signed) D. Molière."

The result of the investigation was to show that the calf which served as vaccinifer presented no traces of glanders, nor of any other discoverable disease, but its actual condition could not be ascertained by an autopsy, IT HAD BEEN RETURNED TO THE BUTCHER FOR SALE AS MEAT!

Strumpell in his account of Glanders s ays :

"In a case which takes a chronic course there is a possibility of mistaking the cutaneous ulcers for syphilitic ulcers and that the treatment of acute cases is almost hopeless." (Practice of Medi-cine, translated by Shattuck, p. 106.)

Is it not rather that Farcy is the equine analogue of Syphilic-Tuberculosis in one of the worst forms?

Dr. Cory the official instructor in vaccination of the British

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Dr. Boens said in 1879 that the epidemic was not glanders, but inoculated Syphilitic Tuberculosis.

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Government testified before the Royal (Br.) Commission on vaccination, 1889, that calf vaccination causes MORE sore arms and other vaccinia disasters than arm-to-arm; and although those who advocate calf vaccination maintain that its use avoids the danger of inoculating syphilis and leprosy, ~~as~~ to the former at least we have now seen that the statement is an error.

Further the bovine race is specially subject to tuberculo~~sis~~ disease, and the inoculation of the products of the metabolism of the calf, and especially of to diseased products, is apt to develop that disease where a tendency to it exists, and to create such tendency where it does not.

Dr. A. M. Brown, in a paper " On the origin of Contagion," says

"Complex and alarming disorders of the Cerebro-spinal and nervous system in nurslings sometimes follow vaccination."

and to this ~~And~~ Referring to the reports of the Registrar-General, which show a great increase of infantile mortality from what are called cerebral meningitis in its idiopathic and more obscure forms, Dr Brown says :

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"A probable explanation, though unsuspected even by our experts in pathology, lies in the toxic physiological action of the cadaveric alkaloids, the ptomaines, to whose place in the pathology of vaccination, animal or human, by whatever made, the attention of the scientific interest in the question is for the first time directed."

Dr. Leonard Woolbridge in communicating his investigations to the Royal Society says :-

"Perhaps the most interestin g result obtained has been the isolation of a substance from perfectly fresh animal tissues, the injection of a solution whereof into the blood of an animal causes instant death."

He also states that the most convenient sources of this substance are the various fresh tissues of the calf.

In an excellent booklet, entitled "Vaccination or Blood Poisoning with animal diseases" Dr. Ed. Al Heath (not dated) Heath Co. London, pp.11-12., the author says :-

"Let us suppose that the Bacillus or the microbe is destroyed by the glycerine, the ptomaine or poisonous animal-alkaloid, which is formed by them during the decomposition of animal matter still remains; and this very poison is no doubt increased in power by the glycerine, which is a natural solvent of animal ptomaines and animal poisons.

To those having any knowledge of chemistry ~~or pharmacy~~ the Physiological foregoing is a truism, unhappily the vaccinists and bacteriologists seem unable to grasp it. Béchamp's discoveries suggest a further reason for the ~~virulence~~ of the ptomaines viz fermentation.

Dr. Cless of Wurtemburg gives an account of a case of what he reluctantly admist was the "apparent lethal termination of a case of vaccination" of which the diagnosis was "Endemyo-carditis with formation of thrombi." The case was one of Calf-lymph vaccination with immediate death as the result, and the post-mortem revealed that the child was killed by the coagulation of the blood.

As the occurrence of convulsions as a sequela of vaccination has frrquently been attempted to be ascribed to other causes, and the vaccination denied to have had any thing to do with them, the cases of the Morrissey children in which the relation of cause and effect is absolutely indisputable will be of interset.

During the small-pox scare in New York in I894-5, two children of John Morrissey of No. I795, 3rd. Ave., New York City: Rose 3 years old and Mary 2 years old, being at the time in perfect health, were vaccinated on March I5, I895 by a physician from the Board of Health. On Sunday the I7th. the younger child was seized with convulsions and died within a few hours. Dr. Sharp who attended her ascribed the cause to vaccination. At 5 o'clock in the morning of the I9th. the older sister was seized with convulsions and exhibited precisely the same symptoms as those of her sister. Dr. Sharp attended her also, and ascribed the cause of death to vaccination. The cororer's physician (an official doctor) said the death resulted from undeveloped (!) scarlet fever. Dr. Sharp, however, insisted that the symptoms were not those of scarlet fever, and (we must suppose, being unwilling to contradict his official brother,) then said he was unable to tell the cause of death. ~~Now in~~

Two epidemics of Vaccinal-syphilis will now be mentioned, mainly because of their important bearing upon the pathology of vaccination, in that the syphilitic infection was conveyed (?) from a healthy vaccinifer, and secondly because of the determined efforts to suppress and deny facts made by the French Officials, in which they were ~~aided~~ seconded by those of Great Britain.

On the thirtieth of December, 1880, fifty-eight recruits of the fourth Regiment of Zouaves, stationed at Algiers were vaccinated and

infected with syphilis in an aggravated form. Every effort was made by the Officials of France to suppress the facts. As to the English, Lord Monk Bretton (then Mr. Dodson) president of the Local Government Board, stated that the facts alleged could not be true, because they were opposed to all experience, as it was expressly mentioned that the child from whom the lymph was taken was in excellent health. But for the noble devotion of Mr. William Tebb and for his pecuniary ability to go personally to Algiers and ferret out the facts, they would have been absolutely buried beneath French and English official suppressions and misstatements, and denials. On applying at the British consulate for a letter of introduction from the Consul (Colonel Playfair) to enable him to obtain access to the official reports in Paris, as Dr. Dujardin-Beaumetz, the surgeon in chief, at the Hospital advised him to do, that gentleman (the British Consul!) positively refused to give him any assistance whatever in his disinterested labors or to aid him in any way to get the information desired.(23) That the vaccinifer in this case was in excellent health up to the date of its vaccination was clearly proved, as well as that its parents were healthy; efforts were made to show that the vaccinifer suffered from inherited syphilis, but signally failed; nor was it till after the syphilization of the soldiers that such an accusation was even thought of. It became evident that the syphilization of the vaccinifer was INVACCINATED! But though every attempt to connect the vaccinifer with a syphilitic taint prior to its own vaccination failed, it, as well as nearly all the fifty-eight recruits vaccinated from it died after frightful sufferings. One of the leading physicians of Algiers, Dr. Emile Bertherand, Editor of the 'Journal de Médecine et de Pharmacie" of Algiers remarked :

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(23) Some idea of the toil and difficulty of extracting the truth from officials and of getting access to public documents against the persistent opposition of officials, may be gleaned from the testimony of Mr. Tebb before the Royal (Br.) Com. before referred to , See. Q. 9,530-9,796.

An abstract of Mr. Tebb's testimony appeared in "The Homoeopathic Physician" Vol XVIII & XIX. 1898 & 1899 Phil: and was afterwards published together with a biography of Mr. Tebb & the author in the form of 2 booklets of 81 Pages 8° Part 1 Phal Lesly is printed post chapter vol 1 Phil work.

"I have seen the infected youths and the cause of their misery is not disputed. How ridiculous to deny in London what every one here in Algiers knows to be true."

All the British Medical Journals, and so far as my research therein enables me to tell, all the American ones, kept every reference to the case out of their pages, except a short paragraph in the London 'Lancet' of September third, 1881.

On the thirteenth of March, 1885, Dr. Andrew of Asprieres vaccinated forty-two infants. All of them were attacked with fever and on the following day six of them were dead, their bodies being covered with patches.

On the sixteenth of April of that year, the Mayor of Villefranche, replying to a letter from Mr. Tebb wrote, that the story was "nothing but a culpable invention of the Reporters". (Royal Com. Rep. ubi sup. Q.9,835) On the eleventh of June, 1890, Mr. Tebb produced before the Royal Comm. a copy of the official report of Dr. E. P. Brouardel, President of the "Comité Consultatif D'hygiene publique de France" in which all the facts were admitted. The report states that as a consequence of the vaccination six children died; four in twenty-four hours, one in forty-eight hours, the remaining children were all or almost all very sick. Dr. Brouardel is one of the most influential upholders of vaccination in France and is particularly offensive in his abuse of the opponents of the practice.

On July third, 1899, in Fall River, Mass., Henry Gervais, aged four years, died from the effects of calf lymph vaccination. The physician's certificate, more truthful than is generally the case, stated that death was caused by "Tetanus from ulcer of Vaccination." John B. Lake of Providence, Rhode Island, father of a large family died on June thirtieth, 1899 from convulsions caused by Calf-lymph vaccination. Lita Dahn, eleven years old, of Ackeley, Iowa, died July seventh, 1899, from Lock-jaw caused by Calf-lymph vaccination. The school Board enforced the order of the Health Board, refusing to educate the child unless she was vaccinated. On July eleventh, 1899, John Curtin, aged

ten, was at St. John's Riverside Hospital, New York for Tetanus from Calf-lymph vaccination. He died a few days later. # In the final report of the Royal (Br.) Comm. of 1889, Sec. 433, the Commissioners say -

> "Some of the best qualified witnesses have expressed a deliberate preference for arm-to-arm vaccination, believing that the advantages of Calf-Lymph are more imaginary than real."

Drs. Barlow and Ackland who were engaged by the Commission to investigate certain cases of injury, think that -

> "Calf-lymph, as now usually employed, tends to produce more severe inflammatory reaction than that which has been humanized." (Minority report, sec. 186)

Those gentlemen also stated -

> "There are a certain number of cases in which from causes which can not at present be foreseen or prevented, serious results ensue from cutaneous eruptions, such as generalized vaccinia, impetigo, eczema, etc.; though in their experience the number is small. These seem to be more frequent after vaccination with calf-lymph and are for the most part free from danger, though often giving rise to considerable distress."

Sir George Buchanan, Chief Medical Officer to the (Eng.) Local Government Board, referring to the Rugen disaster said -

> "I have heard of dilutions of lymph with glycerine, always from people complaining of the lymph," ## "It will I trust be long before such preposterous adulterations of vaccine give the opportunity of investigating their results in English practice." (Trans. of the Epidemiological Society, Vol. V. pp. 117-8).

The Royal Commission recorded eighty-four cases of serious injury, resulting in twenty-four deaths from the use of Glycinerated calf-lymph. (Appendix IX. # final report.

In the "Indian Lancet" it is said, Vol. IX. p.221) March first 1897) "Glycerine is a nutritive medium for the growth of putrefactive and other germs, and being fluid, the germs soon pervade it throughout; and as a fact, this preparation (glycinerated lymph) in India soon becomes putrid and septically dangerous."

A fatal case of Impetigo Contagiosa from vaccination formed the subject of a trial in the Court of Common Pleas in Phil: in 1902. ~~I believe it is still pending. (May, 1904.)~~ verdict for the Plaintiff - the Court awarded another trial.

Calf-lymph so diluted and thus denounced by the chief authority in Great Britain, decried also in 1890 by the Local Government Board and by the pro-vaccinist members of the Royal Commission of 1889, is now the dilution favored by the same Local Govt: Board and is in use in nearly all the vaccinating States of the United States, and in most European Countries.

At Newburg, N. Y., Sept. 1894, a pupil at the Academy was ordered to be vaccinated or leave the school. She obtained a 20 days permit (of absence) hoping the Board of Education would recall or modify its order. This the Board did not do; having to choose between abandoning her education or vaccination she unfortunately submitted to the latter. Up to this time she was in perfect health and 15 years of age. In a few days her arm swelled to an immense size. For weeks she could not raise her hand to her head and was frequently obliged to remain home from school. Her distress was so great that on several occasions her mother had to remain up with her all night applying poultices. At last at Christmas 1894 her parents found it necessary to remove her from school. Up to March 22, 1895, her arm had not healed. Her system has been so weakened that she cannot go about alone. Her mother says she has not had a well day since her vaccination, prior to which she had never been ill.

Newburg News March 22/1895.

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On Wednesday the 15th, January 1902, Henry Richard Essex, aged 50, residing at Burgoyne Road Hornsey, toll clerk at the Central Meat Markets, Smithfield, London, was vaccinated. A thoroughly healthy man till vaccinated - steady in every way. His widow reports that during the whole of the following week except Tuesday the 21st, he was obliged to stay at home because of headache and a feeling of tightness across the chest. On Friday the 24th, headache and pains increased - consulted Dr. Le Sage - On Saturday, the 25th, delirium and semi-unconsciousness and at 1:30 A.M. Sunday, Dr. Le Sage was again called. ~~He~~ H. Essex continued unconscious until he died on Monday at 6 A. M. The virus used had been obtained from the Local Government Board and it was learned by questions in Parliament that the virus had its origin from a virus obtained from Cologne (as was frequently done by the Local Government Board) but the source and pedigree of the Cologne virus were unknown. This was passed through 4 or 5 calves before being used as vaccine material and produced severe symptoms in several other cases but, so far as known, no other death. An inquest was held and the verdict of the jury was "that the deceased died in a state of coma caused by some septic condition following vaccination."

Vac. Inq. Vol. XXIII, p. 224 & Vol. XXIV p. 10
and correspondence.

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On the 25th of Sept. 1901, Mary Power, aged 4 months, daughter of an actor living at 9 Pancras Street, London, W. C., was vaccinated by Dr. Claremont, the public vaccinator. The arm never healed and became gradually worse. The legs, feet and hands were swollen. The child vomited and died on the Oct. At the inquest held Oct. 22nd, Dr. Ludwig Freyberger of the Great Northern Hospital said the swellings were due to vaccinia, but that the child died of pneumonia. Vac: Inq: Vol. XXIII, p. 138, confirmed by correspondence.

On the 17th of January, 1902, Nathan Hoare, son of Mr. amd Mrs. Nathaniel Hoare of 17 Mill Head Terrace, Guildford, Surrey, was vaccinated by the public vaccinator with virus obtained from the Local Government Board.

The child was 4-1/2 years old and had always been healthy until he was vaccinated against the wishes of his parents, but the father was threatened with renewed prosecution and felt he could no longer fight against it.

The poor boy soon complained that his arm hurt him and on Wednesday, January 29th, was very drowsy. During the night he screamed out and on his father going to him, he found that his left leg was paralysed.

Next morning his little hand was clenched, his arm rigid and his left limbs and side paralysed. He became unconscious and died on Tuesday, February 4th, just 2 weeks after vaccination.

Vac. Inq. Vol. XXIII, p. 223, confirmed by correspondence.

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Harriet Stow, aged 8, was vaccinated on the 11th of January at her home No. 12 ~~Oriel~~ Oriel Terrace, Homerton. She had been thoroughly healthy up to the time of her vaccination by the public vaccinator, who, according to the statement of Dr. Fletcher, an Inspector of the Local Government Board made at the inquest, used glycerinated calf-lymph furnished by the Local Government Board. Some of the sores did not heal. On Tuesday, the 21st January, ~~she~~ the child went to her mother's room and complained of pains in her head. She vomited and became delirious and finally unconscious. On Thursday morning the mother tried to give her some food but found her jaws tightly closed. There was froth at the mouth. On the 4th day after vaccination, the arm was very inflamed, the sores running a dark yellow matter and on the Tuesday, it became mottled, purple and red.

She suffered greatly from pain in her head and died on Friday, the 24th of January, 1902.

Vac. Inq. Vol. XXIII, p. 223 and correspondence.

On the ~~2nd~~ 30th of August, 1902, Harvey Laurence Thorpe, a child of three months was vaccinated. It had suffered previously from eczema but had been well in all other respects. On the 31st August he died. He became ill on the night of the 30th and the doctor who had previously treated him was called in. He found the baby in a state of coma with a temp. of 101 degrees. The doctor stated in his certificate as the cause of death "Vaccinia 34 hours".

(Vac. Inq. Vol. XXIV p. 142 and information obtained for me by Mr. John H. Bonner at my request.)

The child of Henry Birrinbach, a waiter of Tachbrook St., London, S. W., healthy till vaccination, died shortly after from blood poisoning and suppuration of the knee joints, according to Dr. Freyburger, Pathologist to the London Council, in consequence of infection from wounds in the skin of the left arm produced for the purpose of vaccination. Ib p. 166.

Jas Telfair Taylor, son of George E. H. Taylor, Sound Bend, Indiana, born March 4th, 1900 was in excellent health when vaccinated Dec. 3rd, 1906. Tetanus developed on the 23rd December and he died in 24 hours and 40 minutes.

On the nineteenth of November, 1902, Leonard A. Weiss, five years old, son of Henry J. Weiss of No. 667 East 137th. Street, New York was vaccinated in spite of the protests and prayers of the Mother, by Dr. Heller a physician employed by the Health Department of that City On Tuesday the twenty-fifth of November the child complained of headache and had fever. On the following Saturday the fever returned and Dr. Burnes, Dr. J. C. Levinsky and Dr. J. H. Lurie were called in to the vic-tim. At ten P. M. the child's body became rigid, (Qy. Oposthotenos?) the jaws became locked, and after hours of agony the child died at three A. M. And by what RIGHT was this agony inflicted upon this help-less child? For what purpose? Has this child been protected from Small-pox? YES! In the only way in which vaccination ever does "pro-tect".

At Cambridge, Mass. on Dec. 28th., 1901, Annie Caswell died from Tetanus from Vaccination. (mirabile dictu!) In this case the death certificate discloses the truth.

At Owasso, Mich., David B. Green, aged 62, was vaccinated, fell ill at once and died at the above date of blood poisoning.

At Guttenburg, Iowa, Miss Laura Gobell, aged 20 was vaccinated and as result she died Dec. 25th., 1901 after great suffering.

At Des Moines, Iowa, a son of Martin Dinuzzo, aged four years died the 26th. January 1902 of Blood Poisoning from Vaccination.

At Minneapolis, Minn., Rea H. Smith died on the 13th. February 1902, of Tetanus from Vaccination.

At Watertown, N.Y., a school teacher, having been vaccinated, had erysipelas in due course as required by Jenner for "successful vacci-nation": this as is not unusual with erysipelas, passed into Pneumonia and he died, December the sixteenth, 1901.

At Ware, Mass., John Henry aged eight, was vaccinated in 1901, was at the time in perfect health, consumption developed and he died of it in 1902

At Lawrence, Mass., William H. Spires, aged seventeen being in sound health, was vaccinated as required by the barbarous law of Massachusetts, blood poisoning ensued and he died on the 16th. of Dec., 1901.

At Philadelphia, Pa., Clifford Martin, died of Tetanus from Vaccination, December, 1901.

At East Braintree, Mass., Christena Jorgenson, aged nineteen, died of Tetanus from Vaccination.

At Brighton, Mass. a child of Frederick Jackson, died from Vaccination, January tenth, 1902.

At St. Paul, Minn., Robert E. Duffy, aged ten perfectly healthy till vaccinated, died on January twenty-seventh, 1902 of "Pernicious anemia" caused by vaccination.

At Chester, Pa., Jennie Phillips, aged 15, died February 6th. from the effects of vaccination after suffering terribly since the month of August, 1901, when she was vaccinated. She was in perfect health till vaccinated.

At Phillipsburg, New Jersey, --- aged 24t died in January, 1902 after terrible suffering from the effects of vaccination.

At Burlington, Vermont, Ethel Clark, aged 11 and Minnie Blair aged 13, healthy till vaccinated, died from its effects February and April, 1902.

At St. Louis, Mo. Theresa O'Brien, aged three years and Mary Dippenbrock, aged 19 months, died of Tetanus caused by vaccination: the former on March seventh and thelatter on March 19th., 1902.

At Scranton, Pa., Florence Conwag, died in terrible agony from Tetanus caused by vaccination; the two doctors in attendance on the unfortunate child excised the vaccinated portion of the arm in the vain hope of staying the disease, she died February 22nd., 1902.

At Princeburg, Pa., Joseph Kelley, aged thirteen, died of Tetanus caused by vaccination on the 21st. of February 1902.

At Charles City, Iowa, Georgia E. Heffron, aged three years, died of Tetanus caused by vaccination on the tenth of February, 1902.

At Appleton, Wisconsin, Edward A.Rockstroh, aged 27 being in perfect health and about to take out a life insurance policy was required by the Insurance Agent to be vaccinated, he did so, was immediate-ly taken sick and died on the 18th. of Feb. of what was called rheumatism of the heart.

At Milwaukee, Wisconsin, Millie, aged six, daughter of Machholz died of Tetanus from vaccination, March the eleventh, 1902, healthy till vaccinated.

At Wilmington, Delaware, John Salinski, aged 21 months died of Tetanus from Vaccination, March the fourth, 1902.

Also at Wilmington, Del., Ellen Lynch, aged eight years died of Tetanus from Vaccination, March thirteenth, 1902.

At Easton, Pa., Florence Cooper, aged nineteen died from the effects of vaccination, March seventh, 1902.

At York, Pa., Sadie Bussie, aged eighteen, died of blood poisoning from vaccination March the third, 1902.

At Pueble, Cal., Henry L. Walker aged fourteen died of the fever of vaccination, March sixth, 1902, So doubtless died Jenner's first victim, the poor boy Baker.

At Taopi, Minn. Hexel Campbell, died of blood poisoning from Vaccination, March 28th., 1902.

At La Crosse, Wis., Mrs. Frank Techman, died from blood poisoning from vaccination on March, 1902.

At Charleston, South Carolina, Miss Annie Goode died of Tetanus caused by vaccination March 21st ., 1902.

At Martinsville, Indiana, Harry son of C.C.McMorris, died of Tetanus caused by vaccination, March the thirtieth, 1902.

At Huntington, Ind., Louis Delvin aged five, died of Tetanus caused by vaccination, March thirty-first 1902.

("Vaccination" April, 1902.)

At Cleveland, Ohio, School director Cooley, being then in good health was vaccinated in August 1902, and in about two months after-wards, having been meanwhile in general bad health, inflammation broke

broke out in several places on his arm, including the point of vaccination. This was followed by small blisters and great eruptions. (Cleveland Leader, October 30th/, 1902.)

At St. John, New Brunswick, Herbert Campbell, aged 23 was vaccinated last winter, (This was vaccinated Jan 19 02) and died within a week of blood-poisoning.

At East Brinfield, Mass., Miss Janes was vaccinated, was taken sick immediately and died in June 1891.

At Halifax, Nova Scotia on May the seventh, died William Murray from vaccination. He was a man of perfect health and vitality and was vaccinated in Montreal on Thanksgiving Day, 1901, in consequence of an order that had been issued that "all must be vaccinated". Mr. Murray had been in the employment of the 'Dominion Express Co.' for eleven years. Up to this time there had never been a blemish on his skin, but soon after the vaccination an eruption broke out over all his body. He returned to Halifax and was nursed by his sister, who was a trained nurse. He was attended by Dr. Slater and by Dr. John Stewart. On January 22nd., 1902 he started to go out on a business trip but fainted away: he continued sick and died after great suffering on the seventh of May. A Post Mortem examination disclosed a sac of purulent matter in the brain. At Brockville, Ontario, Carolyn Hitchcock, twenty three years old, a niece of Senator Fulford of the same place was vaccinated also on Thanksgiving Day, 1901. Her arm swelled to a fearful degree and she was taken to the Royal Victoria Hospital at Montreal where an enormous accumulation of matter was excised. The poison then went to her knee and to-day, one year after the vaccination she is confined to her bed, with her leg in a plaster-of-Paris bandage.

Dr. Woodhouse of the "Dahome" S. S. of the Furness Line, between London and Halifax, vaccinated himself in April, 1902; he died on the voyage of blood-poisoning caused by vaccination.

In Dalhousie College, Halifax, a medical student was vaccinated last winter (1901-2) shortly afterwards he went hopelessly insane from the action of the poison on his brain. He is now confined in Mt. Hope Insane Asylum, Dart-mouth, Nova Scotia.

In the fall of 1895 there were living in Yonkers, New York, Mrs. Lora C. Little, her husband and one little son named Kenneth. He was nearly seven years of age, and the parents wished to enter their one darling in the public schools. All pupils were required to be vaccinated, and when the mother learned this she wished to make a fight upon it, but the father thought it useless and so the child was vaccinated! A small red lump appeared on the site of the vaccination and disappeared after about two weeks leaving very little scar.

Up to the date of his vaccination Kenneth had been a healthy, hearty child, and his skin had been clear and smooth. Hygienic surroundings of the best had been his and a mother not given to coddling, but one of the most sensible, careful and loving of mothers.

Brown spots appeared shortly after the lump died away, upon body and limbs, they were some of them of the size of a silver dollar, (30/20 of an inch) and there were a number of them - - perhaps a dozen. Catarrh attacked the child, and in spite of careful attention continued all winter. Late in January he came down with measles. Under careful hydropathic treatment and nursing he recovered, but the catarrh continued.

Having business in Washington, Mrs. Little took Kenneth with her, and there, in the first week of April, he was assailed with diphtheria and died, as it was said of diphtheria, but by whatever name it might be called, the history of the case shows that it was the enfeebled condition caused by the vaccination which rendered him susceptible to it; indeed, the year before he had passed unscathed through an epidemic of diphtheria in Yonkers which had broken out in a kindergarten which he attended; and there was no epidemic of diphtheria either in Yonkers or Washington when he was seized with it.

Says his mother in her letter dated July 24th. 1905, "I know of nothing better that the mother of Kenneth Little could do as a memorial to one of the most companionable and amiable of children than to exert herself to save other children and

other mothers from a like fate."

Dr. Tennyson C. Deane of San Francisco, California, a highly successful physician and surgeon of San Francisco, has an only son now in his 11th. year who has always enjoyed excellent health. Dr. Deane has persistently refused to allow his son to be vaccinated, although continual pressure has been exerted upon him - among others by his own father who is also a physician - to induce him to have it performed - he refuses saying; "my boy is healthy now and I intend to keep him so; if when he is grown up he should be fool enough to wish to make himself ill either by vaccination or other poison, that will be his look out." Says Dr. Deane; "in my practice I have seen several cases of diphtheria and in every instance the afflicted children had been vaccinated and most of the cases have occurred in such a manner that I believe I could see the connection between the vaccination and the diphtheria. Further when diphtheria has been all around, I have seen that the vaccinated children, living under the same conditions as the vaccinated have escaped, while the vaccinated became victims to it."

At Montreal, Stephen Fairbanks was vaccinated in May, 1901, in obedience to the edict of the Board of Health. In a few days, his face became absolutely covered with sores, and all summer his arm was "running with matter."

Vera Fairbanks, assistant matron at Jewel Day Nursery, New York, was vaccinated in obedience to the demands of the Board of Health, in November, 1901. In a few days, violent pains, starting at the wrist, attacked every joint in her body, and ever since she has been in poor health.

At Halifax, Nova Scotia, Miss Nora Piers was vaccinated in January, 1902. Up to that time she had been in perfect health, but shortly after the operation, the virus "went to her hip", and she had to be carried up and down.

("The Animals Defender", December, 1902.)

At Jamaica Plains, Boston, Massachusetts, Hollis Spurr, aged a little over four years, was vaccinated in the early Fall of 1902. Up to that date he was a chubby healthy boy, very bright and the pride of his parents. He became ill immediately

and so continued until his death in the following December (1902) after great suffering. (Letter of Matilda D. Hanna to the author, March 1st. 1903, quoting her father Mr. Darry as further witness of the child's good health till vaccinated.)

The readiness with which Cow-pox may be inoculated upon the horse producing a sort of Horse-pox, indicates a close relation between the two diseased conditions: and the readiness with which both cow-pox and horse-pox may be inoculated upon man, points to a human origin for both in some cases. Nor do I doubt but that Dr. Creighton's

207 view is also correct as to the origin of many cases of cow-pox, and that besides cow-pox of syphilitic origin, pustulous sores sometimes arise through dirt getting into cracks upon the cow's teats, and made virulent by the "mercil~~e~~ess manipulations of the milkers," They may at first answer the description of Jenner of his imaginary "spurious" cow-pox, viz. "No erysipelas attends them nor do they show any disposition to become phagedenic."

Had the Royal College of Physicians in 1807 been possessed of a little more of the spirit of criticism, instead of satisfying themselves with merely repudiating Jenner's 'spurious' cow-pox; it is not improbable that they might have discovered that the 'spurious' cow-pox was that which had not undergone the "merciless manipulation of the milkers", but had been mercifully permitted to rest till they healed; while the cow-pox which Jenner regarded as genuine was that which had been thus tormented into malignancy. This is not asserted as a fact but as a hypothesis for verification in the future, being suggested by analogous facts of pathology; but as before remarked, the College had committed itself unreservedly to the dogma of prophylaxy, and to have pushed their criticism to this extent would have been too "merciless a manipulation" of the dogma, and exposed the unscientific haste of their past proceedings.

Now when the slight sores, already pustules or not, have becom-e malignant through the "mercil~~e~~ess manipulations of the milkers" they represent or 'simulate' syphilis, and when inoculated, if not "managed" as the Suttons managed their variolous inoculations, their virus will be apt to produce those disasters and fatal results of which the literature of this "grotesque superstition" is full.

Reference has already been made to a probable source of some, perhaps of many, cases of "spontaneous" cow-pox which may here be more particularly mentioned, first because I do not think any other Author has noticed it, and secondly because it will in a great measure account for the difficulty in tracing cow-pox to what is perhaps a not unfrequent source, as well as for its resemblance to syphilis.

(2) Second Report of the Royal (Br:) Comm. Testimony of Dr Charles Creighton (Q. 5726-7.)

Somewhere in the middle of the last century, (I think it was in 1854) I was attending the assizes on the home circuit in England, when a man was brought up for sentence, having been convicted of an unnatural offence with a filly. In mitigation of punishment, affidavits were presented to show that he had syphilis and had been assured that he would be cured by copulating with a virgin, that not wishing to give the disease to a girl, he had committed the act whereof he had been convicted, with a young mare. Many of the man's companions deposed as to their having also been informed and that they believed that copulation with a virgin was a cure for the pox, and medical testimony established the fact that theprisoner did have that disease. This same superstitious belief prevails largely among the negroes of the South, among the mixed population of the East side of New York City, and among the lower classes of Europe. Having written to the late Dr. Hubert Boëns of Brussels, a name well known in the world of science, suggesting this as a probable source of cow-pox, he wrote to me as follows :

> "L'histoire de guérison de syphilis par la copulation avec une vierge est un préjugé qui date de moyen age. Tous les ouvriers de nos charbonnages, il n'y a pas vingt années, croyaient encore que le remède est infaillible. Oh! la bêtise humaine est insondable, Et c'est sur cette immense bêtise humaine que les charlatins de l'école Jenner et Pasteur ont échaufaudé leur insensée pratiques vaccinales."

The statement of this renowned Belgian physician finds confirmation in Brantôme, quoted by Ricord in his illustrations of venereal diseases (Edition by Dr. Goddard, p.19) who tells us that Francis I., de--bauched the ladies of his court in the hope of thereby being cured of the disease.

It is easy to understand how difficult it would be to trace such an origin for a case of "spontaneous" cow-pox, at a time when, under the absurd provisions of the law, a confession would have consigned ~~the~~

The Judge ~~took the papers~~ and proceeded to order sentence of death to be recorded against the prisoner, a mitigation of the capital punishment until then recently inflicted for the offense, and implying imprisonment for life with hard labor, ~~and stated that the antidotaries should be forwarded to the Home Secretary, but should be accompanied by a petition for a mitigation of sentence which he (the judge) had no power to grant.~~

the unfortunate wretch either to the gallows, or, when the law became less Draconic, to penal servitude for life.

Among the numerous facts which, bearing upon the pathology of vaccination, indicate also the unscientific character of the minds alike of the "immortal Jenner" and of his medical followers, is the following:

The dairymaids legend of smallpox immunity conferred by cow-pox was not only accepted without investigation as to the source or character of the pox on the cow, but without any attempt being made to learn whether the milkers caught the pox from the cow or the cow from the milkers, although Jenner supposed that the milkers carried it from the horse to the cow.

That inquiry has since been made. Mr. Bonnewyn a learned pharmacist and member of the Academy of Medicine of Belgium reports numerous cases having come under his personal observation of dairy maids suffering from secondary syphilis, but either ignorant of the nature of their disease or trying to conceal it, continued to milk the cows in their charge two or three times a day, and thus inoculated them with syphilis. (Trans. of the International Congress of Anti-Vaccinators, 1885, Report of M.Bonnewyn.)

Dr. Hubert Boëns reports a case of "spontaneous" cow-pox as discovered in a village near Brussels. He and M.Bonnewyn investigated it, and found that the cow was being milked by a woman who was being treated for syphilis by Dr. Thiry of Brussels. This was indeed a case of 'poetic justice', for Dr. Thiry had been one of the most arrogant and insolent of the vaccinists of Belgium. "Fools, knaves, crazy lunatics" were some of the choice flowers of rhetoric applied by him to Dr.Boëns # personally and to all those who, like him, were seeking to investigate vaccination in the true scientific spirit.

Dr. Boëns was one of the most renowned physicians and men of science of his day in Belgium. As Medical Superintendent of the great State Prison at Charleroy (near Brussels) he had unparalleled opportunities for witnessing the remote effects of vaccination and of syphilis.

In 1882, Mrs. E. L. Gaylord was teaching school at Dover in the state of New York. By order of the Board of Health of that City she submitted to be vaccinated. She was at that time a hale hearty young woman. She became very sick and had to give up her school. Her complaint was called 'Black Erysipelas' by ~~the M. D.~~ Dr. Couch who attended her, ~~a Dr. Couch.~~ She continued very sick for a long time and finally removed to Nora Springs for her health. After twenty years of intense suffering she died there on the twenty-second of April, 1902.

W. A. Skinner of Nora Springs, Iowa, in a signed and witnessed statement dated at Nora Springs, May 23rd., 1902, says :-
In the winter of 1879 or 1880 he was attending school at Rockford, Illinois, the school board ordered all the children to be vaccinated, and he was vaccinated. His arm remained sore for weeks. He was twelve or thirteen years old at the time and until then had never been sick a day. His family removed shortly after to Kansas. His left foot began to swell and turned to a dark purple color. Then his leg swelled to three times its natural size and broke out all over with sores. Has thirty seven scars on his ~~leg~~ leg from these sores, not one smaller than a silver dollar. Then the forefinger of his right hand broke out near the knuckles, three large pieces of bone came out and he suffered intense pain for a long time. His left hand is badly disfigured. Amputation of his leg was talked of, but his condition would not permit it. He suffered greatly. He says :- "I feel that God has spared my life that I may be a living witness against the greatest humbug ever imposed on any people. I am glad to answer any question at all times regarding this matter. I never received any injury or committed any imprudence which could account for my suffering except that of my vaccination, to enable me to continue attending school."

M. L. Jackson of Nora Springs, Iowa, also made a signed and witnessed statement on the same date and says :- He is sixty-six years of age; about forty years ago he was vaccinated from another person's arm; "It caused a breaking out or skin disease which has never left me to this day. My brother was affacted in the same manner, suffering until his death about ten years ago."

Maye Amos Bronson, made a signed and witnessed statement at

the same time and place, he says :-

> "I was vaccinated at the age of four and one half years in Mankato, Minn. My arm swelled terribly, I had six abscesses, my spine was affected badly, causing me untold suffering, my blood was permeated with scrofula, I became almost blind at one time, also had to wear a brace on my left foot for several years; in fact I was so deformed as to be almost a cripple: I am still, at the age of twenty-five a sufferer from my vaccination at the age of four and a half, my hearing I have never recovered."

The witnesses to the last three testimonies are, Mr. L.H.Piehn President of the Nora Springs National Bank, and Mr.Juan Wilkinson.

The father of Paul Lincoln Jones, of Columbus, So. Dakota, The Rev. James L. Jones, writes that, his son was nine years of age and in the best of health, large, active and strong for his years when he was vaccinated by Dr. Munger, at St. James Minn., so that he might attend school. His arm and shoulder were swollen to an immense size and a physician was called in from Sherborne, Minn. who considered the child in great danger. After a time the condition of his arm improved, but rheumatism supervened. His blood was poisoned, he never again was able to attend school except for about one week. He was attended by several physicians all of whom pronounced his case hopeless. He suffered unspeakable agony for over two years and died on the twelfth of October, 1901.

In the Toronto Globe for April the eleventh, 1882, appears an account of insanity apparently transmitted by vaccination. It was a case of a preacher of Jerseyville, New Jersey; Edward Newman, who was vaccinated with virus taken from the arm of a man subject to spells of temporary insanity. Mr. Newman became violently insane. Similar cases were testified to by competent witnesses before the Royal (Br.) Comm. of 1889.

On the seventh of March, 1882, Mr. H. C. McWhorter wrote to the late Henry Bergh an account of the vaccination of his wife and consequent death as follows :-

> "On the fourth of last May my dear wife was vaccinated, contrary to her wishes, and only in deference to public opinion, and to that of our physician I allowed it to be done. She shrank from the vile operation and it would not have been performed but for my thoughtless, may I say careless, words: "You had better submit, it can't hurt you". She submitted because of confidence in my judgment, when the truth is, I had thought so little on the subject as to have no right to an opinion. Her blood was poisoned,

abscesses followed under her arm, and probably internally. She lingered until September first, when death relieved her sufferings, and my heart was robbed of the companionship of the sweetest spirit I ever met. To have her thus snatched from me in the vigor of life and bloom of health is the most crushing bereavement that ever befell me. While she lingered it became generally known what her trouble was, and I was utterly astonished at the great number of persons who knew of deaths and other serious results from the unnatural practice."

In a recent number of the New York Medical News some one, apparently one of the Editors of that Journal, a certain Dr. Ernest Wende, is permitted thus to vituperate the ablest and most conscientious and learned members of the medical profession who fill the ranks of the opponents of the superstitious rite:

"The special obstacles confronting the subject, (i.e. "how best to treat small-pox,") are as follows: (1).....(2) The injurious interference of anti-vaccination and vaccinophobia due to ignorance, dishonestly and insanity."

The following is from "The Banner of Light" Boston, Mass. March, 1862. "A few weeks since, the youngest son of John McLean of Auburn, New York was vaccinated. A week after the operation he became violently ill, lock-jaw ensued and after great suffering he died."

Tetanus as a sequela to vaccination dates almost from the earliest practice of the rite and is constantly recurring. It holds a prominent place in the pathology of vaccination.

On the 27th. November, 1901, Dr. Robert N. Willson read before the Philadelphia County Medical Society a paper on "Tetanus appearing in the course of Vaccinia Report of a case."

This paper is reported in Vol. XXII of the proceedings of the Philadelphia County Medical Society pp. 353 - 366. It is to be regretted that this paper is marred by some blunders of carelessness as well as the more serious errors to which attention is called in the text. (+)

Note (+) E.g. In speaking of Edward Jenner, meaning the self(and by others often)styled discoverer of vaccination, Dr. Willson speaks of him as Sir William Jenner, a distinct person of a later generation not even related to "the illustrious".

The case together with those of Camden, New Jersey, which occurred about the same period aroused Dr. R. N. Willson to and investigation of the subject of post-vaccinal tetanus. Unfortunately, Dr. Willson, though apparently anxious to serve the cause of truth and humanity was "obsessed" at the time with an active religious faith in Cow-pox prophylaxy and with the germ theory of disease, and besides shows himself lacking in that logical faculty, which all medical men should, but which very very few do possess.

In his paper Dr. Willson criticizes severely certain statements officially issued by the Presidents of the Board of Health of Camden, New Jersey; but as the mis-statement he particularly criticized in that paper was asserted in an even more extravagant form by a committee of the same Board in their report upon eleven cases of tetanus, whereof ten were post vaccinal with nine deaths, I shall consider the statements of the Board, and this and another paper of Dr. Willson together.

One of the statements of the President of the Camden Board of Health thus criticized by Dr. Willson was that certain cited facts (?) "proved conclusively that cases of tetanus appearing from three weeks to one month following vaccination, can in nowise be attributed to the virus employed, nor to the faulty technique of the physician."

Erroneous as this statement is, the Committee, composed of four official doctors, contrive to outdo it. On p. 9 of their report they say: "Indisputable (?) evidence of the fact that the tetanus germs were not introduced at the time of vaccination is, that acute tetanous occurs in from 5 to 9 days after the introduction of the germs, (Osler, Sternberg, Park,) whereas in every case acute tetanus occurred in from two to four weeks after the vaccination. If the virus had been contaminated, tetanus would have ensued within nine days after vaccination."

Did this example stand alone one would simply stand aghast at the effrontery of such a statement, but considering the characters of nearly all medical officials in the United States and that the incumbants of such offices scarcely ever owe their several positions to any qualification other than sycophan-

cy to, or being the protegees of the low political bosses who have so long urged this country on the road to ruin, the medical observations of such persons would not merit even a passing notice, but for the unhappy fact that, no matter how undeserving of attention an M. D. may be, the moment he has been interjected into some official position, - the press, not only the lay but the medical press also, at once begins to take him seriously, and hang upon his words as though they were those of an oracle. It is therefore worth while stopping to expose the above error, due either to unpardonable ignorance or to mendacity, promulgated from his official throne first by the person who in the Fall of 1901 held the position of President of the Board of Health of Camden, New Jersey, and then by the committee appointed, nominally, to investigate the deplorable vaccine deaths which occurred in the Fall of 1901, but really to find excuses for them.

It would be easy to go back to old authorities in refutation of the statements now criticised; but the enormous conceit of the present generation of physicians is such, they have so thoroughly persuaded themselves that wisdom began with them, that I will confine myself to some of their own recent authorities and will begin with "The system of Surgery" of Dr. Samuel, D. Gross; 6 "Edition; Philadelphia, 1882. At p. 630 Dr. Gross says:

> "The period which intervenes between the occurrence of the injury and the development of the disease, is liable to considerable variety. Generally it ranges from four to ten days. In some instances, well-marked symptoms supervene within several hours after the receipt of the injury, and on the other hand the attack may not occur under eight or ten weeks. In rare instances the disease does not appear until after the wound that provoked it is completely closed, owing doubtless to some lurking irritation in the nerves of the affected parts or the retention of some foreign substance."

And at p. 633 Dr. Gross reports the case of a girl of fourteen who had locked jaw from having been accidentally hurt nearly a month previously, and a little further on, on the same page, he

cites the case of a man 50 years of age to whom the injury had occurred about five weeks previously.

Dr. Gross gives a highly probable explanation for such a "lengthened period of incubation" as follows:

> When the virus lies in a dormant state for an unusually long period, it is no doubt locked up, as it were, in the cicatricial tissue of the wound in such a manner as to be unable to extricate itself until by some organic change of the (precise) nature of which we are ignorant, they are so softened and disintegrated as to bring it under the control of the absorbent vessels, through the agency of which it finally gains admission into the system."

It is also probable that in some cases it becomes incapsulated, while still in the lymphatic channels. At some time, at any time, in the near or distant future, the capsule may rupture, either from metabolism, or as the result of a blow, or from mental shock.

Strumpell in his "Practice of Medicine") (Translation), D. Appleton Co., New York, 1901 p. 11 says:

> "Traumatic tetanus, seldom begins immediately after the injury has been received. Several days or even weeks may intervene previous to the outbreak of the disease."

Dr. Huddleson of New York, is quoted by Dr. Joseph McFarland in the Journal of Medical research May, 1902, p. 49, Dr. McFarland quotes him as saying:

> "In cases of tetanus following vaccination, we find the shortest period of incubation to be 6 days, - the longest 39. He also says: "The probability is that the tetanus baccillus is ingrafted into the skin at the time of vaccination, but fails to find suitable conditions for its growth until after the development of the vaccine lesion paves the way by the local destruction of tissue."

In the Columbus (Ohio) Dispatch of February 11th. 1903,

> Dr. R.D. Connell said: "it is not an infrequent occurrence for the disease (tetanus) to develope weeks after the poisonous matter enters the system."

Dr. P. S. Connor in Pepper's system of Medicine, Vol. V. p. 549 says:

> "Following the receipt of a wound, tetanus may be developed quickly, or only after many days, cases of more or less credibility, being on record of immediate appearance and of an elapsed interval of one, two, three, or even seven months (the latter in a case occurring during the late (i.e. the civil) war" and Dr. Connor says:
> "Doubt may be very properly entertained as to the

> true tetanic character of some at least of these very long delayed cases, or of their dependence upon the previous traumatism The very common belief that after the lapse of three weeks no fear of the disease need be entertained, is unquestionably an erroneous one."

Now the 'doubt' in the mind of Dr. Conners - evidently a conscientious, and, as far as his obsessions permitted, a fair-minded physician, is due to his lack of logical training. The wound in the case cited by Dr. Conners was a septic wound, as are in their very essence all vaccine wounds.

It is well known that hydrophobia, which generally includes tetanus among its symptoms, frequently lies latent, following a septic wound, for all sorts of intervals from days to years; and when there is absolutely no evidence of any other septic wound than the bite or other injury known, the hydrophobia is properly ascribed to that injury as its cause. We have too a specific case of the vaccine poison lying latent for two years until started into activity by an attack of scarlet fever. (Supra. Note 31 to Chapter 1, ~~p.217~~ (p.36)).

The special committee of the Camden Board of Health appointed as mentioned, made their report in November, 1901. The cases they describe, in fact, speak for themselves in spite of the sophistry of the Committee employed to rescue, since it could not longer "preserve vaccination from the reproach" of those cases.

> "Case 1. Wm. I. Bauer aged 7 years, white; residence, Camden, New Jersey, was vaccinated October 12th. 1901 with glycerinated virus, marked "good until 12/26/01." Aseptic precautions (!) used before vaccination. Tetanic symptoms appeared Nov. 1st. 1901 ....the case rapidly grew worse, developing typical tetanus and died November 3rd. 1901."

Nothing is stated in the report as to the previous condition as to health of the victim in any of the cases. I endeavored to obtain information upon this head but could get no assistance from the Camden Board of Health, not even the residences of the parents of the victims nor of those who survived.

In one of the fatal cases a sort of excuse is suggested in the report that the 'scab' was lost during play, thus unwillingly confessing to the good health of the victim, at first,

which even vaccination had not daunted. In three of the cases, the first, fourth and tenth, the report states, as something important, that the victim's brother was successfully vaccinated at the same time, from the same virus without bad results. The student of this work will appreciate the ignorance of pathology and biology the making of such statements indicated on the part of those making them, for the purpose of showing the harmlessness of the poison in the face of ten cases of post-vaccinal tetanus, eight of them fatal.

"Case 2. Wm. Brower age 8 years, white, residence Camden, N. J. vaccinated October 14th, with glycerinated virus, and marked "good until 12/26/01." Aseptic precautions used before vaccination. Tetanic symptoms presented themselves November 4th. 1901.....Tetanus antitoxine used with other remedies - said to be improving. (Tried to find him in 1905 for the purpose of ascertaining his post-vaccinal history, but without success.)

Case 3. Anna M. Warrington age 11 years, 2 months; White, residence Camden, N.J. vaccinated October 19th. glycerinated virus, capillary tubes; marked "good until 12/10/01." Aseptic precautions used before vaccination. Tetanic symptoms occurred on November 6th. 1901, continually increased in violence, died November 8th. 1901.

Case 4. Frank Cavallo ahe 5 years; white, residence Camden, N. J. vaccinated October 25, 1901 with glycerinated virus, capillary tubes. Aseptic precautions used before vaccination.....November 8th. child complained of a stiffness of the cheek muscles.....at 5 A. M. November 9th. a typical case of tetanus existed, patient died at 3 P. M. same day.

Case 5. Lilian E. Carty, age 16 years, white; residence Camden, N.J. vaccinated October 14, 1901, with dry virus, ivory points; virus marked "good until 12/10/01". Aseptic precautions used before vaccination. Tetanic symptoms appeared November 8, 1901. Shield was worn. Patient died in tetanic convulsions November 15th. 1901.

Case 6. Thomas B. Haxleton, age 11, white, residence Camden, N. J. vaccinated October 23rd. 1901; glycerinated virus, ivory points; marked "good until 12/10/01". Aseptic precautions used before vaccination. Tetanic symptoms appeared in mild form November 11th. 1901. On morning of November 12th. tetanic convulsions set in. Patient died 4:15 A. M. November 13th. 1901.

Case 7. Anna B. Cochran, age 9 years and 7 months, white, residence Camden, N. J. vaccinated October 21st. glycerinated virus capillary tubes. Virus marked "good until 12/10,1901". Aseptic precautions used before vaccination." Tetanic symptoms Nov. 13th. continued to grow rapidly worse; died November 14th. 1901.

Case No. 8. Was a case of tetanus in a boy of 13 following a wound from a small air rifle loaded with small shot received Nov. 8th. 1901, died Nov. 16th. 1901.

Case No. 9. Mamie Winters, age 8 years, white, residence Camden, N. J. vaccinated October 26th. with glycerinated virus in capillary tubes; marked "good until 1/5/02." Aseptic precautions used before vaccination. Tetanic symtoms November 15th. 1901. Patient stated to be improving. (Tried to learn subsequent history in 1905, but could not learn her whereabouts.)

Case 10. Georgiana Overly, age 9, colored; residence Camden, N. J. vaccinated October 26th. dry ivory points. Aseptic precautions used before vaccinating. Nov. 22nd. physician was called in .....case seemed mild at first.On Tuesday tetanic convulsions set in, child died about 11 A. M.

Brother successfully vaccinated at same time and place with the same kind of virus, is in good health. (Tried to verify this, could not learn residence.)

Case No. 11. Ada Heath, age 15 years; white, residence Camden, N. J. vaccinated about three weeks previous to date of attack of tetanus on November 25th. The case was a typical one, violent from the outset; patient died November 26th. "

The foregoing are the statements of the ten cases of post vaccinal Tetanus given by the Committee of the Board of Health of Camden appointed to investigate (?) the cases and the report is signed by Henry H. Davis, M. D.
Joel W. Fithian, M. D.
Sylvan G. Bushey, M.D.

Committee of the Board of Health

W. S. Jones County Physician.

What now is their reasoning upon them? They occupied themselves with various trivalities, including the procuring of bacteriological reports as to the bacterial condition of the virus, but which are entirely unworthy of credence alongside of the testimony of Dr. Crookshank and of Dr. Walter Reed given in Chapter XIII of this work, and are absolutely worthless from a point of view of real science; but they state: (p.7).

"None of the authorities of which we are aware quote tetanus in connection with vaccination....."

Assuming this statement to be true, it demonstrates their monumental ignorance of the literature of vaccination. An absurd pronunciamento of Dr. James Nevins Hyde is quoted; we shall pay some attention to this gentleman presently, meanwhile the Committee quote Dr. Hyde as saying that:

"If a modern traveller could find himself transported

> to the streets of London as they appeared in the early part of the past century, it is probable that no peculiarities, dress or behavior would be to him so strikingly conspicuous as the number of pock-marked visages he would encounter among the people at every turn; and how different today....."

In Chapter XV. Post p. Vol. II. will be found the results of Dr. Creighton's examination of the "Hue and Cry" from 1667 to the year of 1774, clearly showing that among the very class among whom pock-marked faces were most to be expected only sixteen out of one hundred were found so marked, and some of those were described as only "a little disfigured."

That these gentlemen of the Committee of the Camden Board of Health and Dr. James Nevins Hyde, believed, - or rather believed they believed, the foregoing statement I do not doubt; but how utterly incapable they are of scientific thinking, how mere parrot-like is their supposed knowledge, and how they have even omitted to make themselves acquainted with the literature of their own side of the question, will now be made apparent.

The annual report for 1821 of the National Vaccine Establishment - printed by order of the House of Commons, contains the following statement:

> "As a proof of the protective influence of vaccination, we appeal confidently to all who frequent theatres and crowded assemblies, to admit that they do not discover in the rising generation any longer that disfigurement of the human face which was obvious everywhere some years since."

This was in 1821 - what then becomes of the dictum of Dr. James Nevins Hyde as to the pock-marked faces in the early part of the past century, and that too when from 1667 to 1774 the proportion of pock-marked faces in the class in which they are most to be expected, was but 16 in 100?

But the National Vaccine Establishment in its report for 1825 declares:

> "What argument more powerful can be urged in favor of vaccination than the daily remarks which the least observant must make, that in our churches, our theatres, and in every large assembly of the people, to see a young person bearing the marks of small-pox is now of extremely rare occurrence."

This was still in the early part of the past century - in

1825, and in 1667 - 1774 among the class most likely to be pock-marked it occurred only in 16 per cent!

Again Dr. Epps director of the Royal Jennerian Society and who after vaccinating over 250000 persons awakened to the truth that vaccination was a fatal mistake; wrote as follows in 1831 before his eyes were opened:

> "Seldom are persons now seen blind from small-pox. Seldom is the pitted and disfigured face now beheld; but seldom do mankind inquire for the cause. It is vaccination....."

Thus pock-marked faces were seldom seen in 1831 ~~nearly~~ seventy ~~five~~ sixty years ago. But vaccination, the cause assigned for their disappearance was wholly insufficient, inasmuch as at that time not ten percent of the people of England and Wales were vaccinated!

But in Plate XXIV Fig. 3 the reader can see the portrait of a five fold vaccinated and re-vaccinated young man of the present day as fully pock-marked as has ever any where been seen.

In the Lancet (London) for June 29th. 1872, after vaccination had been made obligatory for nearly twenty years, and enforced with cruel despotism for 6 or 7 we may read of "the

> growing frequency with which we meet persons in the street disfigured for life with the pitting of small-pox. Young men, and still worse young women are to be seen daily, whose comliness is quite compromised by this dreadful disease."

Dr. Savill who reported to the Royal Commission on Vaccination 1880 on the outbreak of small-pox at Warrington in 1892-3 admitted that at that time 99.2 percent of the inhabitants had been vaccinated. "Yet" says he: "I have not seen so many

> pock-marked people in one place since visiting Northern Africa."

(Appendix V. to final report pp. 4 and 7.)

The entire report is a strong argument for the need of training physicians in logic; but a curious illustration of the peculiar incapacity - or worse - of the learned physicians who signed this report, is to be found in their having reproduced the too well-known Franco-German-war small-pox fable. Unless we are to accuse them of inexcusable dishonesty, we must assume that they are sufficiently ignorant to believe in its truth

i.e. that they have not taken the pains to make themselves familiar even with the literature of their own side. This fable, as it continues to be reproduced and was lately promulgated as part of the basis of one of the remarkable decisions of that Court will be considered in a future page in this work.

The Committee seem to think the fact that one of the fatal cases of tetanus reported (case No. 8) arose from a gun-shot wound from a small air rifle, exonerates the vaccine wound in the other (ten cases) Strange reasoning! Even to them it must be clear that had not the boy been wounded by the air gun he would not have got tetanus, and so with the other ten, had they not been wounded with the vaccine ~~xxxxxxxxxxxxxxxxxxx~~ they would not have had tetanus, and the eight who died from it would most probably be living today.

Some attention must now be given to Dr. James Nevins Hyde quoted as authority by thr Committee of the Camden Board of Health.

Dr. James Nevins Hyde is (or was) Professor of skin and venereal diseases at Rush Medical College, Chicago, and is the author of numerous writings on Dermatology, which so long as they simply describe clinical appearances are worthy of study and deserve confidence. He is also the author of "A practical treatise on diseases of the skin" and is an energetic upholder of vaccination. In the 3rd. edition ~~(p. 151)~~ he asserts that:

> "Either by arm-to-arm vaccination as was formerly extensively practiced, or by the use of the animal virus which has of late been well-nigh exclusively used in America, there has been conferred upon millions of human beings a degree of protection against variola the value of which is beyond estimate." 3rd. edition p. 151.

Against this bald assertion, wholly unsupported by evidence, the reader will weigh the enormous number of post-vaccinal small-pox cases described or cited in this work and in numerous other publications; the official statistics quoted herein and in official documents; always bearing in mind that the official statistics have everywhere for the past 100 years been

gathered and recorded by official upholders of the doctrine, who have not scrupled to falsify their records where they could do so with impunity "to preserve vaccination from reproach," as ingenuously avowed by Dr. May.

Against the bald assertion of Dr. J. N. Hyde, weigh too the teachings of Physiology, of Pathology and of Biology, to all of which such a thing as the insertion of septic matter into healthy blood as a means of securing health, is inflagrant contradiction, a veritable nonsense!

But even this enthusiast is unable to deny that "complications" frequently arise from the "simple operation" of introducing the products of disease into the blood under the name of vaccination. According to Dr. Hyde these complications are due either to "impure virus" or to the patient.

(In the edition of 1887 p. 152 Dr. Hyde & Montgomery say)

> "Dermatitis, erysipelas, lymphangitis, adenopathy and severe grades of inflammation of the subcutaneous tissue.....may complicate the process which may terminate by central sloughing, ulceration, slow-repair, and the production of a typical cicatrix."

The innocence displayed by Drs Hyde and Montgomery of what the records of the pro-vaccinists ought to have made known to them, is illustrative of the gross ignorance of the subject which pervades the class to which they belong.

In speaking of Erysipelas as an " untoward complication of vaccination", they ignore absolutely the highest authorities on their own side. It has been shown that "some degree of erysipelas" was emphatically insisted on by Jenner as an essential feature in a successful vaccination and in plate ____ fig. we have presented what the Philadelphia Board of Health today regard as a type of successful vaccination; but this has been so thoroughly shown already in this work that it will not be further labored here.

Our authors, and they are but specimens of their class, are not only innocent of the fact that the vaccine pustule has been proved to be, in effect, a chancre, but they even regard it as still a doubtful question whether:

"the lymph from a typical vaccine -vesicle in a syphilitic vaccinifer, will necessarily transmit syphilis if accidentally commingled with either blood or the products of inflammation at the base of the pock."

If the ~~use~~ use of the word "necessarily" they mean in all cases, ~~absolutely ignoring the conclusive evidence thereof~~ the phrase is disingenuous - for some persons may be constitutionally immune to any ordinary infection; if they mean to deny the ~~adduced before the Royal (Br.) Commission on Vaccination 1889,~~ transference of syphilis via a syphilitic vaccinifer, they ignore the conclusive evidence thereof before the Royal (Br.) Commission 1889 as well as the case of Dr. Cory; and though they refer to the case of Mr. Hutchinson, it is evident that if they ever read Mr. Hutchinson's descriptions - and this is doubtful, - they did so without understanding; for some of Mr. Hutchinson's cases were from calf-lymph vaccination; and yet even as to them Mr. Hutchinson observes (himself continuing an ardent pro-vaccinist!) that the ablest syphilographers could not distinguish the symptoms from those of syphilis. A similar case, from New York Board of Health calf-lymph is shown in the Atlas Plate ~~XXII~~ Figs. 2, 3, and 4

I think this is not plate XXII Fig 2384

Dr. Cory's case is signally illustrative of the child - like innocence of Drs. Hyde and Montgomery, because, in his case, the virus was obtained from a "typical vaccine vesicle free from blood" (Note 1.) See Osler's practice of Medicine p. 72) Since the publication of that work Dr. Cory has died from the effects of his self-inoculated syphilis, Every effort to hush up the facts has been made by the Local Government Board of England and other persons involved "to preserve vaccination from reproach" and no clinical history of this most instructive ~~case has been permitted~~ to appear, i. e. so far as could be seen; the vaccinists boldly affirmed for many years that if no blood could be seen, there was no blood in the virus and the microscopist (Mr. Farr) employed at the expense of the people of Great Britain to examine the vaccine virus prepared for insertion into the blood of the luckless children of that country, looked only for red blood corpuscles and passed as free from blood all specimens in which such red blood corpuscles (or certain other defects described by him) could not be seen. ~~(Note 2) R. Vol. First report 8.~~

It is conceeded by Dr. Hyde in his treatise on diseases of the skin - 3rd. Ed. 1903 pp.100, 1, that

"Vaccination may awaken in the patient a latent syphilis, as also a list of contageous disorders not contageous in character. Thus an Erythema (Roseola Vaccinia, vaccinola, etc:) Eczema in many of its forms and other exudative processes may be first aroused in the integument by the turbulence of a successful vaccination. These rashes may become generalized and may even assume a formidable appearance.

As a result of the investigation to which Dr. Willson was incited by the case of tetanus occurring in his own practice and by the Camden cases, he presented to the American Medical Association at its meeting at Saratoga, New York 1902 "An analysis of fifty-two cases of Tetanus following vaccination, with ~~in~~reference to the source of infection" occurring from 1839 to 1902, which will be found reported in full in the Journal of the American Medical Association Vol. 38 - Jan. to June 1902.

In the course of it he says:

"There is abundant indication that tetanus has occasionally appeared in the course of and following vaccination from the time of Jenner down to the present day, and the cases included in this paper date backas far as 1839. Many such cases, however, have for one reason or other, only rarely reached the attention of the profession. While some physicians have desired the truth at any cost, others, through an unwise zeal for the protection of vaccination from discredit, have joined with many firms that manufacture vaccine to suppress and discourage reports of this unfortunate complication of a most beneficent measure."

Dr. Willson gives a short but sufficient description of some fifty cases of tetanus following vaccination - some of them with"arm-to-arm" some with the "pure calf lymph product.

Too much praise cannot be extended to Dr. Willson for the care and honesty with which he conducted his investigation. Unhappily he was "obsessed" with religious favor in behalf of vaccine prophylaxy and of the germ theory of disease and this "obsession" rendered him incapable of seeing the truth which he dangled before his own eyes.

His conclusions are of value, but for a purpose very different from that which he intended; he says:

(Journal of the A. Med. A Vol. 38, May 10, 1902 p.)

"Infection has taken place in most if not in all cases at the site of the vaccination."

Then clearly if the patients had not been vaccinated, they would not have had tetanus, the symptoms of which Dr. Willson says: "are the sealing of the death warrant,not the beginning of the infection."

Dr. Willson continues:

> "We have found that the exact time of infection and the exact means are impossible of absolute and scientific proof."

Here we see the unfortunate effect of the lack of logical training on the mind of this conscientious physician.

He repeatedly admits that the 'germs' which he imagines and assumes are the sources of tetanusmay be carried in along with the vaccination - in other words may be invaccinated. Waiving aside for the present the question of "germs", and treating only the logical aspect of the question, we have in this paper the admission that vaccination may be the cause of tetanus, that is to say, that it is a sufficient cause and Dr. Willson will not deny that it introduces septic material into the system: "Non licet causae multiplicare", the old rule of reasoning to which frequent reference has been made and will again be made in this work, now forbids the indulging in any supposition that possibly something else happened (whereof there is no evidence save such imagining) which may have caused the tetanus.

My view of this most important and interesting question is as follows:

In the present condition of pathological knowledge there is no absolute certainty with respect to the etiology of tetanus or of any other diseased condition. With regard to tetanus, there is a large mass of evidence tending to show that it may result from the mere irritation of a nerve (electrically or otherwise), especially of a nerve root or of a nerve ending. Also that it may be induced by the introduction of septic material into the system in any part of the body, when the local symptoms will vary according to the nerves with which the septic material may come in contact and upon which by reason of such contact, it acts as an irritant. In "Science" (The MacMillan Co. N.Y.) for October 6th. 1905, N. S. Vol. XXII pp. 417 etc., is an article by Prof. Hans Meyer, being the first of the Huter lectures delivered at the Johns Hopkins Medical School, wherein he shows tetanus resulting from the inoculation of a

~~sterile toxin derived from the tetanus Baccillus.~~

Dr. Willson condemns the use of glycerinated virus, as well as that of the 'shield', so urgently insisted on by nearly all the prominent vaccinators of the United States, as being disposed to "present a more extensive ulcerative surface and a greater tendency to sloughing than the dried virus or the arm-to-arm method," which last he says: "is today an impossibility on account of the ever spreading syphilization of the masses", and Dr. Willson is unable to see that this "ever spreading syphilization of the masses" is due to the almost universal use of vaccination i.e. of syphilization.

Dr. Willson makes this important admission:

> ".....the vaccine wound is a surgical condition that requires as skillful care as an abdominal incision."

Then before proceeding to make vaccination universal, provision should be made for the reception and nursing in suitable hospitals of all the patients who are to be reduced from a state of health to one needing "as skillful care as an abdominal incision." No such provision has ever been made anywhere in the United States (or elsewhere) , and is it not an abominable cruelty to force the masses to submit to so critical an operation, when it is positively known that they are incapable of paying for, or of procuring aliunde the needed care? And is it not a bitter mockery on Dr. Willson's part to tell them, as he does, that the responsibility rests with them as much as with the physician to carry out strict asepsis in the case of a wound expressly made septic by the

Note p. 87 But in the United States especially the final responsibility rests with the people and they have ignorantly and supinely permitted a lot of neurotic medicine-men to hypnotize even them and their helpless children with abominable cruelty

down the bars" and that upon them devolves the dreadful responsibility? ⊕

Note

I leave now to the appreciation of clinical physicians these efforts of Dr. Willson to ascribe cases of "tetanus following

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I leave now to the appreciation of clinical physicians these efforts of Dr. Willson to ascribe cases of "tetanus following

vaccination" to anything except their obvious cause - the inserting into the blood of a confessedly organic, and most probably an organized poison, together with his suggestion of impossibilities as a means of preventing it in the future!

In order not to break the continuity of Dr. Willson's paper, I have postponed notice of a paper by Dr. Wm. I. Velchmer of Camden, New Jersey, on a case of post-vaccinal tetanus which had been under his care and which paper was read before the Northern Branch of the Philadelphia County Medical Society on the 30th. December, 1901, reported in the Journal of the American Medical Association Vol. 38 p. 268b, in which Dr. Kelchner says:

> "There was but a very short period of incubation and the doctor was inclined to look upon this complication as being caused by some micro-organism in the virus used in vaccinating the patient."

"In the name of the Prophet - Figs!"!

At a meeting of the Northern Branch of the Philadelphia Medical Society held December 19th. 1901.

Dr. Joseph McFarland, Prof. of Pathology and Bacteriology in the Medico-Chirurgical College Philadelphia, read a paper on "Vaccine virus -.its preparation, and the complications attending its use." He said:

> "If cow-pox is small-pox of the cow, we should be able to produce it at will by inoculating cows with the virus of small-pox. When the attempt to do this is made, failure to produce small-pox usually results. The variolated vaccine usually shows no reaction following such an inoculation, or there forms upon the udder a small nodular swelling without any of the typical characteristics of cow-pox. If a drop of serum be squeezed out of this enlargement and transferred to a human being, he becomes variolated; if it be transferred to another cow, it produces an identical lesion. Occasionally such a transfer of variolous matter is followed by the formation of a typical cow-pox vesicle which readily infects other cattle and also produces vaccinia in man."

The statement in the text is true in one meaning of the term "infects." But care must be taken not to confuse this with the term "infections" in its ordinary usage as denoting the quality of being carried through the air to and infecting another animal. Dr. MacFarland doubtless meant that by inoculatinn and only by inoculation the diseased condition called cow-pox would occasionally be produced in an animal

~~310~~ 89

~~inoculated with such transformed variolous matter.~~

Dr. MacFarland gives a plausible explanation of the difficulty in originating one affection from the other. His explanation is marred by his obsession with the germ theory of disease and of the protective power of small-pox and vaccinia. Had he been familiar with the admirable discoveries of Bèchamp his explanation would have been free from this blot; if pages 217 b to 218 a inclusive were to be rewritten in the light thrown upon biology by those discoveries and by Prof. Vogt's memoir sent to the R. B. C., the paper would be perfect. Dr. McFarland speaks of "the Accidents and complications of vaccination" and acknowledges that "they have been very important and serious in the past"; in view of the passionate and insolent denials of nearly all provaccinists, from Sir John Simon down, this admission is important. He then describes what he terms "the possibilities at the present time", and which he believes are "few in number and usually unimportant" since the general adoption of bovine virus. He recommends "strict aseptic precautions"

Insert. 89

The Croyden Times of April, 12th. 1902, describes the case of a girl, four years old vaccinated in compliance with a notice sent by the school authorities.

> "On the eleventh day the girl became very ill and during the succeeding night she was seized with a fit. Four doctors were called in on account of her alarming symptoms which were consistent with lock-jaw. The poor little mite lost the use of her limbs, the mouth became fixed, and death ensued exactly fourteen days after vaccination, the cause stated on the certificate of death, was "Pneumonia and heart failure" thus concealing the true cause, exactly as Dr. May explained was frequently done "to preserve vaccination from reproach."

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Insert

In the Belper News of April 25th., 1902, is an account of eleven new cases of severe sickness from vaccination, in some of them with frightful suffering including four deaths. The truth of the narative is vouched for, by the editors of the journal which is one of high repute in the midland counties of England.

Dr. William Scott Tebb in "A century of vaccination" pp. 359-361, one of the most judicially written works which have ever appeared upon the subject of vaccination, gives eleven undoubted cases of Tetanus from Vaccination, among them one mentioned in Appendic IX, to the Royal (Br:) Comm. Report. The London "Daily News" of October 26th.,1889, mentions another case, that of

Grace Edith Buckwell. At the inquest in that case the Doctor showed an open-mindedness, which is very unusual among Vaccinators. He (Dr. Codd) admitted that the child died from lock-jaw caused by vaccination, and said:-

> "It was a most unfortunate occurrence as it could not fail to strengthen the prejudice against vaccination which already exists in the minds of many."

Dr. Codd in his letter of explanation to the Board of Guardians stated, that he believed it was not the first case on record of death from lock-jaw following vaccination, yet that - "such an accident is so extremely rare as to be phenomenal." In this statement Dr. Codd was mistaken and shows that he is not familiar with the literature of the subject. What is rare in such cases is,such honesty as his! The case is also described in the London Lancet of November 9th. 1889. From the date that the child's arm "took" it began to ail. Three weeks after the operation the vaccination marks had sloughed, coalescing and leaving a considerable cavity; and within two days therafter the child died of Tetanus. Under the recommendation of Dr. Codd who vaccinated the child, the mother covered it with a shield, and this is recommended by the majority of American Vaccinators. But Dr. Snell public vaccinator of Nottingham said of these shields; "The vaccine shields restrict the circulation, rub off the scabs, and are a fruitful source of danger"; Dr. Cory the veteran instructor of vaccination also objected to them; and the Lancet insists that the "Lymph" could not be in fault because six other children were vaccinated with the same "lymph" and no word of complaint is reported as to these six.

It is well to record such reasoning (?) by the recognized organ of the orthodox school of medicine in England in the closing years of the Nineteenth Century, in order that an appreciation may be made in some civilized time to be,of the logical powers of the general body of the profession in the last quarter of "the wonderful century."

A striking comment upon such puerilities is furnished by the case of Dr. Thum before reported (supre p. 154.)

Dr. Huddleson, Bacteriologist of the Department of Health of the city of New York, addressing the New York Academy of

Medicine said:

> "Any form of vaccine (dry points of tubes of glycinerated virus) may be infected with tetanus and may convey it." (Hom. Recorder, July, 1902, p. 332.)

And in the Journal of Medical Research, Boston May 1902, he published some results of his investigations and experiments ~~and~~ and furnished ample evidence that the bacilli which are generally said to cause tetanus are in the virus. In the case of inoculation, there can be little doubt of its being a vera causa; He also says that Mr. Huddleson found the tetanus bacilli present in the faeces of eight per cent. of the calves used in the laboratory of the Health Department of New York.

A case analagous to that of Dr. Thum, though not with a fatal result, is furnished in the Medical News of Philadelphia for May 17th., 1902, which reports the case of a woman of thirty-four, whose breast became infected through nursing her newly vaccinated infant who had, it was euphemistically stated " a severe reaction." The 'Med. News' terms it "a source of puzzling infection of the nipple and breast." Is ~~it~~ not that which is "Curious" the blindness of the Editor and of the vaccinators? A large number of such cases are to be found in the books, among them one in Mr. Hutchinson's Cases to be mentioned presently.

The Medical Times of London, (England) for April, 1872, reported the case of an infant daughter of Mr. Noyes of Modena Terrace, Upper Westbourne Park, London, who died from Erysipelas produced by vaccination, and reported that another of the Noyes children was sick with erysipelas from the same cause.

On the twenty-four of October, 1901, Clifford S. Martin of Philadelphia was vaccinated, against the wishes of the parents, by one of the physicians of the Philadelphia Board of Health, and doubtless with the "pure Glycerinated calf-lymph" used by them, and "under strict aseptic precautions", for so they claim all their vaccinations are performed. The father says he was "a fine healthy boy, four years old, as healthy a little lad as ever you feasted your eyes upon. He was the pride and delight of our hearts."

> "On the 13th. of November symptoms of lock-jaw began to develop in the little fellow. The first sign was hoarseness in his throat, then after a lapse of one day his jaws were locked, his

head was drawn erect, his limbs were contorted, and the vaccinated was bent and drawn, and whenever we gave him a drink of water it would come through his nostrils. Two days later, after suffering terrible agony, our baby boy died in the convulsions of lock-jaw." (Physical Culture, November 1902 & letter to the author from the father, Benj. F. Martin of 2915 N.Second St., Phil. dated Nov. 2nd., 1902.)

230 The Croydon Times of April 12th., 1902, reports an inquest upon the body of Nellie Cooksie. It was shown that she was a strong healthy child of four years, but in consequence of a notice sent out by the school authorities she was subjected to, the Croydon Times says, vaccination, but from inquiries instituted, suggested by the fact that the English law required vaccination within four months, I believe that it was revaccination on the ground that the first vaccination had not taken!) a case of Disputed On the eleventh day after the girl became very ill and during the succeeding night she was seized with a fit. Four doctors were called in on account of her alarming symptoms. The child had lost the use of her limbs, the mouth became fixed, and reason appeared to have departed. The following day the physicians pronounced her case hopeless. In trying to force open the mouth of the little sufferer, rigid with lock-jaw, a tooth was broken. Death ensued exactly FOURTEEN days after vaccination. The death certificate read "Pneumonia and heart failure". The Croydon Times says: "One of the medical witnesses was heard muttering "Bad vaccine: beastly bad vaccine."

The Morning Leader, January 30th. 1902, reports the case of Harriet Stow, aged eight years, vaccinated with Lymph obtained from the "Local Government Board", stated by the L.G.B. inspector present to have been "Glycinerated Calf-lymph", The child, four years old was vaccinated on the eleventh of January, (Saturday,) After terrible suffering the child died with lock-jaw on the 24th. of January.

237 On Friday the tenth of January, 1902, Daisy Sarah Ann Morley aged twenty three years was vaccinated with, it was said, "Glycinerated Calf-Lymph": two days afterwards she was seized with dizziness, pains in the head and vomiting. In the course of an hour or two her jaws became fixed: she could not speak, and she died. The report of the inquest made no mention of the vaccination, but the facts were investi-

gated and published in "The Vaccination Inquirer" of June, 1902.

On Monday the thirteenth of October, 1902, Margaret Campbell died of lock-jaw. She was six years old and had been vaccinated on the fifteenth of September previously at the Yale Medical School, New Haven. She was taken violently sick on the thirtieth of September. Medical examiner Bartlett is reported to have said on the thirteenth of October that -

> "As two weeks had elapsed between the vaccination and the first symptoms of lock-jaw, it was probable that the vaccination was not responsible for the lock-jaw." (New York Journal, Oct.14th 1902., first page, first Vol.)

The paper "Vaccination" for March, 1902, reports four new cases of Tetanus from vaccination in the United States as having occurred in the month of February of that year and which are not included in the list of thirty-two hereafter mentioned, and in the same journal, for April of that year, are enumerated eight fresh cases of deaths from vaccinal Tetanus, besides seven other daaths from vaccination.

In a paper read by Dr. Joseph McFarland, professor of Pathology and Bacteriology in the Medico-Chirugical College of Philadelphia who has made a special study of tetanus in relation thereto, and the vaccination, that gentleman gave a list of Ninety five cases of death from Tetanus following vaccination from the year 1854 to that of 1901. The paper is reviewed at length in the New York Medical Journal for May third, 1902, and in reporting it the editor says :-

> "The usual explanations that Tetanus depends on accidental, secondary infection of the wound, upon the local prevalence of the tetanus germs, upon the carelessness in the subsequent treatment of the vaccination sore, and upon the use of shields, were considered and eliminated as important factors in the aetiology of the complication."

That is, to put this circumlocution into plain language; the stories told, heretofore, to account for Tetanus, when it followed close upon vaccination, aye and sworn to whenever occasion arose in legal proceedings arising out of such cases are, by Dr. and Professor McFarland and by the Editor of the New York Medical Journal, declared to be untrue. Yet it is in the face of this that Dr. Robert N. Willson, in the Journal of the "American Medical Association" for May third and tenth, 1902, endeavors to explain away, in the manner thus condemned by Dr. McFarland

and the New York Medical Journal the fifty two cases of vaccinal-tetanus above mentioned.

At the sessions of the Frenc h "Academie de Médecine", at Paris of the fifth and twelfth of May, 1903, M.Dieulafoy communicated a case of Tetanus resulting from an injection of gelatinized serum. The same serum was examined bacteriologica lly and was found to contain what are called in the report, the "Tetanic germs."

The pus from the corpse of the victim contained "tetanic-spores", and produced tetanus in the animals upon whom it was inoculated. M.Dieulafoy mentioned four other cases of Tetanus from serum-gelatine, which added to the eighteen described by M.Chauffard made 23 cases of fatal Tetanus recognized as due to injections of gelatinized serum.

In the Chicago Chronicle for September I4th?,I905,p.I,at foot of the sixth Col: is the following:

"Special telegram,Oakland,California,September I3: The seven year old son of Charles Wise died today of lock-jaw,a victim of the compulsory vaccination law of Oakland. The boy was vaccinated August I4th: Twenty four days later he developed symptoms of tetanus;he died today. The doctors say they "cannot explain where the contamination which caused the disease came from?!"

The name of the child was Ulmore Thomas Wise;the death certificate reads: "cause of death,tetanus;duration,five days;contriutory cause,vaccination(during thirty days) and is signed' F.L.Herrick,M.D.

The doctors"could not see the forest for the trees"Yet to all persons of common sense it is abundantly clear where the "contamination"came from. It came from,it was IN the virus i.e. the poison with which he was vaccinated. What greater "contamination" can be looked for than the product of disease,the putrefying matter of a sore ?

In "Medical Talk" for December I906 is reported the case of Francis Reisch,seven years old of 407 Dickens Avenue,Chicago,Ill: vaccinated to enable her to enter school,she died of Tetanus Nov: I905 and the doctors reported that "A thorough examination of the body revealed no wound or scar save the vaccination scar;so the physicians confessed that vaccination was the cause of death."

In "The Farmer" of Bridgeport, Connecticutt,for November 9th:I905,quoting "The New Haven Palladium" of October 30th: 1905 it is said that "Mary Krismeyer,a daughter of Mrs:Howard Krismeyer,residing at I22 Commercial St: Nes Haven Conn: was in good health and in all respects a healthy child until she was vaccinated on the 25th: September I905 at the Zunder school;about

two hundred children attending the school were vaccinated at the same time by medical officers appointed by the Board of Health of New Haven. Four weeks later lockjaw developed in poor little Mary and on the 22nd:of Oct: she was taken to the New Haven Hospital. There she lingered in horrible agony till the 8th:of November,when death put an end to the sufferings of this so lately healthy child at the age of six years five months and thirty days;another victim to the barbarous superstitions of a ~~cold~~ conceited age!

I begged the assistance of my friend Major Bowdren of Bridgeport Conn: to investigate this case,who did so and reported the facts to be exactly as reported. He also learned that of the two hundred or more children vaccinated at the same time ,more than fifty were reported by their parents to have suffered severely,to have been very ill for several weeks with very sore arms, many with severe fever,and many continued weak and ailing for many months and so continued up to the time of the latest inquiries, that is to about April 1907!

In September 1905,E.Luba,aged 18 years,was required by his employers, the Southern Pacific R.R.Co. to be vaccinated. The operation was performed on the 14th:~~xxx~~ September. In March following the vaccine scar became painful and showed signs of inflammation. Symptoms of Tetanus developed on Sunday March 18,1906 and he was removed to the Hospital where he died on the following Friday. On writing to DR:P.de la Hautine,the physician who had charge of the case,for a clinical history of it ,he replied with great courtesy by letter of the 2nd.June,informing me that all the records of the hospital were destroyed in the fire following the earthquake of April 18th:1906 and that the family had left San Francisco. What seems to be an account of the same case appeared in the "Liberator" for May 1906 p. 50b,wherein the San Francisco Bulletin is quoted as authority.

On reading in "The Liberator" for april 1907 (p 15) a statement of the case of J Shirey Jr of Bloomington Grove Texas I wrote to his father and obtained from him the following and Clinical History from Dr W. M. Ellis the [illegible] who attended the unfortunate victim. I obtained the clinical history following;

956 post II

14 years old

Daniel F Spiver Jr was in good health up to the date of his vaccination on the 16th Jan.y 1907. The vaccination was said "to take well", but on the 7th February he called on Dr Ellis in consequence of the arm having ~~commenced to become~~ inflamed on the 6th He complained of headache with tention of the muscles of mastication and aching of the neck. On the 8th the muscles of the body neck and legs were rigid, the facial muscles so rigid that he could not open his mouth. Had an occasional spasm and was unable to raise his head from the pillow. At 8. PM. on the 8th all symptoms were exaggerated - temperature normal - pulse 140.

February 9th Spasms worse, all symptoms worse;- clothes wet with perspiration, temperature normal, pulse 150.

February 10th 8 AM. Temperature 99 2/5 pulse 160. patient rigid. spasms worse and more frequent causing cyanosis of face. At 2 PM. Temperature 104 pulse 175, all symptoms worse At 6 P.M. Temperature 105, pulse 200 At 10. PM.

95c

Temperature 107 3/5 pulse 200. Patient seemed
to be unconscious for a few minutes after the
convulsions and died at 12 o'c with hard
convulsion, conscious till a few minutes before
death (Liberator April 1907 Letter Dr Ellis)
Mr James Patterson of Farmington Conn:
wrote to the editor of the "Liberator" (Mass: April 19 07
p.15) "My only son Raymond Hunnerson, a lad of promise was
crazy for the water so we let him enter
the navy. On Nov 27 1905 the day he was 17 years of age he was tried and
accepted being one of two selected out of
48 applicants. The next day he was
again examined in New York; the examining
physicians stated he was physically perfect.
×××× he was sent to Norfolk where he was com-
pelled to be vaccinated. This was on the
5th December 1905. He never recovered from
the illness of vaccination and in April 1906
returned home completely broken in health.
On leaving the hospital he had chills,
then a cough which kept growing more severe,
but he kept his ailment to himself as much
as he could fearing lest he might be dis-
charged from the service. He wrote home

that he had ~~experienced~~ seen more sickness in the few months he was in the ship than in all his life before. He was to come home for a 2 weeks visit before going on the water permanently, but on the day he was to start for home, he had to be taken to the hospital when he could be ~~made~~ moved, he was discharged and sent home to die. He never recovered and died ~~in the hospital~~ on the 16th Dec 1906.

The doctor called it Rheumatism of the heart and tried to make out that he had it previous to enlistment. The mother wrote back that it was not true, and even if it were they should employ better examining surgeons both in Hartford and New York. (It and letters of mother and she informs me he was taken sick 8 of that the boy never had rheumatism in his life and on his father's side the family is very healthy and long-lived 90 and over not having any more to say)

George Harold Meade son of Ed Meade now of Toronto Canada was vaccinated on ship board about the 1st June 1907 and died of Tetanus in Toronto ten days later and the attendant physician with unusual truthfulness gave as the cause of death tetanus from vaccination. The Liberator August 1907 p.140 and certificate of death; copy in my possession.)

The sister who has never had vaccinated ~~his~~ picture ~~Health~~ and now years of

239 The unfortunate perversity which leads the Official Vaccinators to attempt to explain away deaths from vaccinal erysipelas, renders it desirable to present ~~one~~ more cases of this character; ~~the more that it formed~~ The one now described was the subject of an official investigation, and was certified to by the medical practitioner who attended the child and himself an upholder of vaccination, ~~and~~ whose certificate was nevertheless called in question by a more bigoted or less honest medical man. In the Atlas, Plate ~~XXVI~~ VII., Figs ~~2. 3. II. are two~~ is a portraits of the victim, William Henry Fitter, born October thirteenth, 1890. He was a perfectly healthy child until vaccinated. ~~Fig. III. is the portrait of an older brother who somehow escaped vaccination and shows the type of the healthy family.~~ One week after the vaccination ~~of William Henry he still~~ the child seemed well and the official vaccinator filled some tubes with the matter from the vesicles upon his arm. A few days later, it was observed that he would not take nourishment, rolled his eyes and seemed to be in great pain. The father called in a doctor. The swelling noticed upon the arm extended to the wrist. Then little white pimples came about the groin and adjacent parts and as they died away, the skin peeled off in long strips like the skin of a blister. There were Sore places ~~were~~ inside the ankles and on the soles and toes. Then an irregular oval patch of raw-looking inflammation appeared about six inches long by three wide over the left scapula The irritation was terrible. He had no rest. Nothing could relieve the burning torture. He rolled restlessly from side to side. He soon became too weak to cry, giving utterance only to a low moan. (General Phelps in the Birmingham "Daily Post", Feb. 10th., 1891 and "Vaccination Inquirer" Vol. XII., p.210) #(30)

97a

To accompany protocol Before 27 ~~Sept~~
part II ~~Jan~~ 1907 667a

TRANSLATION OF ENTIRE ARTICLE.

Dr. Philip G. Burchardi of Berlin - Friedenau describes in the anti-vaccinator of Dresden in March April 1907 the following case:

"Dwarf development in consequence of Vaccination."

~~Dr. Phil. G. Burchardi.~~

Dr Burchardt presented a portrait of the arrested ~~The opposite picture shows a case of dwarf~~ development in consequence of vaccination, a colored copy is given on the atlas plate. The girl, Helene Schr, ~~from Braunschweig,~~ of Brunswick is now 23 years old. She was born May 12, 1883. Both parents were entirely healthy at the birth of the child. The daughter was vaccinated at the age of 3/4 years just when she began to walk with the aid of a stool to hold on to. After the vaccination the arms swelled and became fire red as if they would rot off; then appeared a dangerous general illness with fever, especially after chills which left only the heart unaffected. Up to her 8th year she was always ill in bed. The intellect is poorly developed, the memory in proportion is good, she cannot, of course, go to school, but has been examined. She possesses taste and is very clean.

The speech faculty is troubled; speaking ~~causes her difficulties~~ is difficult; it seems as if she had something in her mouth.

The consequences of vaccination were most prominent in the arrest of growth. The height is now about 1 meter ~~(39.1 inches) 3 ft 3 in~~, the back has ~~grown~~ become deformed ~~(obliterated)~~, all the limbs remained dwarfed as those of a child of 4 years. The complexion is pale, the appetite ~~minime~~ very small, the secretions ~~do not appear to be entirely~~ are not normal. The upper part of the body is overdeveloped in proportion to the feet, so that the girl cannot climb stairs without help. She is able to walk only a few short distances and this only aided by others. Since February 1906 she has had ~~xxxx~~ several fainting spells and shivering fits.

This patient has occasionally been presented in medical meetings by Dr. Burchardi in Braunschweig.

Again a case where by the ~~damned~~ infernal vaccination a blooming life has been destroyed. ~~German Michel, when will you wake up?~~

Insett 300 Red / following cases W. H. Fitch

9/b

A notice of the following case having appeared in one of the Public Journals, I wrote to the father a physician of Los Angeles in good repute for the details. In January, 1906 Dr. H. B. Fasig, whoe wife was a trained nurse desiring to send their daughter Isabel to school, she being then 5 years and one month old and in perfect health, the father vaccinated her. The vaccination "took" but there was onlyone pustule. Just after the pustule stage the scab was broken off at school. The wound resembled an ulcer irregular in shape; the pus was dark colored and ~~which~~ thick Dr. Fasig and his wife dressed the wound which did not heal. It was indurated at the base and was about the size of a silver quarter dollar. On the 1st February Dr. Fasig did not return from his rounds until 9 A.M. when ~~Dr.~~ Mrs. Fasig told him that Isabel had been restless but had then quieted down. The family consisting of Dr. and Mrs. Fasig and Isabel took breakfast at 7:30 A.M. In the middle of the meal the child said she could not eat, her jaws hurt her. Dr. Fasig examined her and told his wife to give her a hot bath and a dose of calomel. He went on his rounds but being anxious returned at 11 A. M. when Mrs. Fasig told him that Isabel had had a spasm; but was then bright and cheerful. Suspecting tetanus, Dr. Fasig called in another physician, who said he thought Dr. Fasig was unnecessarily alarmed. He however sent for a nurse and administered Parke Davis & Co's anti-tetanus serum, subcutaneously, 10 c.c. every four hours. The wound was cleaned and dressed. The child had a fairly comfortable night but had several typical tonic spasms of moderate severity.

The wound was cleansed and curretted and an enlarged gland removed from over the biceps - pure carbolic acid was applied. The gland was very much diseased. Bromide and Chloral were administered per rectum during the day; several spasms moderate in-

severity occurred. The next day intradural injection was performed. Ten c.c. of anti- tetanic serum was injected. For about 24 hours there seemed to be an improvedent and on the morning of the 4th. day she was bright and asked for food and drink, but at 2 P. M. while sleeping she had a violent convulsion which continued violent and constant. She was kept constantly under chloroform until 4 P. M. of the 5th. day when she died. The vaccine wound remained unhealed at death.

240 During the session of the Royal (Br.) Commission on Vaccination, 1889 and between the first of November, 1888 and the 30th. of November, 1889, two hundred and five cases of death from vaccination were reported to the Local Government Board by the Registrars of Births and Deaths, pursuant to instructions issued by the Registrar-General, so that an inquiry might be made into each case; practically this was remitting to the accused the duty of inquiring into the charges made against him, for it was the Local Government Board itself which must be held responsible for the maintanance and execution of the law under which these deaths were charged to have been brought about. Medical inspectors, that is prominent officials of the Local Gov: Board were charged with the duty of investigation, viz: Drs. Coupland and T.D.Acland made an analysis of their report. With the strongest desire to minimize the facts they were unable to find more than 41 cases concerning which they said " Cases..... in which it is doubtful what, if any, influence was exercised on the result by vaccination."

Their report

The cases will be found in the Appendix IX. to the Royal Commission's report. The least that can be said of these cases is, that if they had not been vaccinated they would not have died!

Medical Reports and an abstract of a number will be found post p. 342-50 with [illegible] to all of the cases

I have collected a list of thirty-two cases, gathered from only two of the public journals of New York City, beginning April, 1894 and continued to February, 1902, in which Tetanus and death followed vaccination in New York, New Jersey and Pennsylvania. In every one of these cases "to preserve vaccination from reproach" the doctors concerned did not hesitate to ascribe the deaths to one or other of the concomitants.

In a letter dated Nov.14,1902, General Phelps returned me the above history which I had sent to him for revision and adds "I saw the dead body of the poor child. No inquest was held. There is no detailed medical description of the case (Thad asked him to send me) 'Hush up,'[illegible] seem to be the Medical tir

which Professor McFarland and the N. Y. Med. Journal repudiate; and they (the vaccinists) were not merely upheld in this dishonest or ignorant procedure, so detrimental to the public welfare, by the press of the time; but furious invectives were hurled at those who disputed it on grounds alike of science and of common sense. Although the excuse has now been repudiated by admitted authorities of the old school of medicine, and is known to be <u>irrational</u> by all who possess a competent knowledge of physiology and pathology, it is yet so frequently employed by men of great learning and experience in other branches of the healing art, that I think some pains to set f[illegible]rtain facts and principles of general [illegible] will be welcomed by those [illegible]hich is the subject of this

Note p 301 red
[316] This susceptibility may vary in a very great degree even among persons of the same race and family. In the summer of 1849 I being then in my 20th year was with a much older and married sister in a country resort in England. In one of our walks my sister envied great dread on finding that we had passed within some 15 or 18 feet of what is called poison Ivy and stated she was once she would be poisoned by it. Dessaint It was the first time I had heard of this poisonous plant and wishing to learn something about it with my indifference of ignorance plucked one of the leaves and rubbed it between my hand, even making a slight scratch in the skin to ensure the poison (if any) entering therein. I did not experience the slightest ill effects; but my sister, who had done all that she could to avoid, not only actual contact, but even contiguity to the plant, soon broke out in all the well known symptoms of ivy-poisoning and suffered acutely for several days.

that all organic viruses
been made to the beauti
iments we learn that the
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#See p 301 red
[illegible] of Duclaux with [illegible]
[illegible] 129-30

which Professor McFarland and the N. Y. Med. Journal ~~have~~ repudiate; and they (the vaccinists) were not merely upheld in this dishonest or ignorant procedure, so detrimental to the public welfare, by the press of the time; but furious invectives were hurled at those who disputed it on grounds alike of science and of common sense. Although the excuse has now been repudiated by admitted authorities of the old school of medicine, and is known to be irrational by all who possess a competent knowledge of physiology and pathology, it is yet so frequently employed by [illegible] of great learning and experience in other branches of the healing [illegible] that I think some pains to set forth certain facts and principles [illegible]eral pathology bearing upon this point will be welcomed by those [illegible]are interested in the special pathology which is the subject of this [illegible]rk.

It is the generally received opinion that all organic viruses are of the nature of ferments. Reference has already been made to the ~~beautiful~~ experiments of Duclaux. [231a] From those experiments we learn that the nature of the soil, or in the case of a human being, we say his idiosyncracy, [241 of 286] is not less a factor in the result than is the seed, a strong testimony against specificity in the result, i.e. in the case of living beings, of disease. (See also Dr Bouchard's Lectures on Microbes and Disease)

Now one ferment or virus may find in one person a culture-medium in which it cannot thrive, and in another, to all appearances similar, it may find the most perfect of culture-media. The susceptibility of the persons operated on may vary indefinitely both in manner and degree: [316] and this susceptibility, as also the virulence and character of the poison employed, are quantities which are absolutely unknown and are likely to remain unknowable, nor can the unjustifiable experiments so often made and which so often prove fatal to those subjected to them, enlighten us as to the idiosyncracy of future subjects of the operation.

Again among one hundred points or tubes envenomed from the same source, no two will carry the same amount or quality of poison, but may vary in both respects from absolute sterility to a lethal dose.

#See the experiments of Duclaux with ferments [231a] Sup pp 129-30

Illustrations in support of these biological laws are innumerable, the following will suffice: Dr. Thomas Skinner vaccinated a young lady of fifteen years at her father's request. The father was chaplain of the Female Orphan Asylum at Liverpool, England. Together they selected for vaccinifer a young girl who was the picture of health, whose vaccine vesicle was as perfect in appearance as it was possible to conceive. On the eighth day he took the 'lymph' in a capillary glass tube, almost filling the tube with the clear, transparent lymph, and revaccinated the young lady, and at the same time revaccinated the mother and the cook from the same tube. Before opening the tube he held it up to the light and requested the mother to observe how perfectly clear and homogeneous, like water, the lymph was. All three operations were "successful" (as that term is employed by vaccinal authorities,) and on the eighth day all three vesicles were matured like "a pearl upon a rose" as Jenner describes a perfect vesicle should be. All went well until, between the tenth and eleventh days after the vaccination, that is, about three days after the vesicle had matured and begun to scab over, the young lady was seized with a most violent rigor, such as generally ushers in surgical and puerperal fever. This was on the eighteenth of March, 1865; after eight days of frightful sufferings she died, and within two hours so great was the bloated and discolored condition of the head and face (and indeed of the whole body) that there was not a feature recognizable. The vaccinifer, as also the mother and the cook, vaccinated at the same time, from the same tube, remained healthy. (#2) Dr. Skinner describes it as the most frightful case of blood poisoning he had ever seen in forty five years practice. Some of the commissioners tried hard to get him to say that some other cause than vaccination might have been responsible for it, but he persisted that it could be attributed only to vaccination and cites Dr. John Cameron of Liverpool as consultant in confirmation.

In the Camden, New Jersey, Tetanus Cases 1901-2 what is known

(#) Royal (Br.) Commission 1889 Sixth Rep: Q. 20,766/pp 128-9

is, that each victim had inserted into his system, beneath Nature's coat of mail, the skin, a quantity of an organic poison, uncertain both as to quality and quantity; to the wound thus inflicted there is no evidence that any other poison had access. To assume that some other poison may have gotten into the wound violates as we have seen a fundamental rule of philosoplic reasoning (sup. p. ~~158~~) But even if it had, even if the presence of such additional poison could be established it would make no difference in the force of the condemnatory facts. For, but for the vaccine wound such supposititious poison would not have entered the body. We know, from frequent and fatal experience that the vaccin

Dr. John Hunter through whose influence, unhappily exerted, Jenner had been admitted a Fellow of the Royal Society, and who is described by by Dr. Charles T. Pearce as "The greatest Physiologist and anatomist this country (i.e. England) has ever produced" said in his "Disertation on the Blood":-

> "The blood has been supposed to be a passive inanimate body, deriving its motion from the action of the heart. Blood is not simply animal matter. Whatever is taken into the system for supply must undergo these changes, viz: Animaisation and Vivication. The blood I conceive to be alive, as it carries life to every part of the body. Any extraneous substance introduced into the blood modifies the vitalised or living fluid. The introduction by inoculation of mineral poisons, or vegetable poisons is hazardous and may be destructive; but the introduction (i.e. by inoculation) of animal products from another living body, be it a man, or a cow, or even the ass, is infinitely more pernicious, because allied to it in being vitalized."

The wisdom of ... generally with fatal results to the patient.

The discoveries of Béchamp and his colleagues of the Medical School of Montpellier furnish a physiological explanation of the failure of blood transfusion, and of the general pernicious and often fatal results of the introduction of foreign organized bodies into the system.

It is now known that not only the more solid parts of the body, but its juices also, are without exception composed of cells, it was supposed that these cells were the 'vital unit.' ~~I have~~ Reference has already ~~referred~~ been made to the account has been given of discovery of Béchamp of the history and function of the generally linear-appearing bodies within the cells and to which he gave the name of Microzymas, because of their minute size and possessing

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~~# Royal (Br.) Commission report (sixth) Q. 20, 766, pp. 128-9.~~

is, that each victim had inserted into his system, beneath Nature's coat of mail, the skin, a quantity of an organic poison, uncertain both as to quality and quantity; to the wound thus inflicted there is no evidence that any other poison had access. To assume that some other poison may have gotten into the wound violates as we have seen a fundamental rule of philosoplic reasoning (sup. p. ~~58~~) But even if it had, even if the presence of such additional poison could be established it would make no difference in the force of the condemnatory facts. For, but for the vaccine wound such supposititious poison would not have entered the body. We know, from frequent and fatal experience that the vaccin ison, in some or other of its numerous shapes is sufficient of it- to induce Tetanus, and Tetanus resulted. The chain of Sequences f Results is complete.

~~It was well said by John Hunter "The introduction by inocula-~~ ~~of mineral or vegatable poisons into the blood, is hazardous, and tain quantities may be destructive; but the introduction of animal~~ ~~ts from another living body, be it a man, a cow, or even an ass, is finitely more pernicious, being allied to it in being vitalized".~~

The wisdom of the forgoing utterance of the Master of Physio- ~~of his day~~ has received abundant confirmation, both clinically and he great discoveries of Béchamp. All experiments of blood trans- ion have signally failed, generally with fatal results to the patient.

The discoveries of Béchamp and his colleagues of the Medical School of Montpellier furnish a physiological explanation of the failure of blood transfusion, and of the general pernicious and often fatal results of the introduction of foreign organized bodies into the system.

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~~# Royal (Br.) Commission report (sixth) Q. 20, 766, pp. 128-9.~~

the properties of ferments. He found that these Microzymas and not the cell formed the 'vital unit', and he found that these vital units were possessed of various properties, varying at different times and with the soil in which they at the time existed, viz: glycolitic, inverting, diastatic, amylitic, coagulating, anti-coagulating etc., but differing for each species of animal (and plant). Hence it is readily to be understood why the introduction of any animal product from one body directly into the blood of another, is, as forseen by Dr. John Hunter, "so pernicious". When the serum of an animal, be it cow, or horse, or sheep, or goat, or buffalo, (and each of these animals, as has been seen above, (Chapter VII) has been recommended as a fitting vaccinifer by grave physicians, each as the one more ignorant than another of the nature, qualities, modes of action and effects of the material he was recommending, or they were) is injected in ever so small a dose, into the blood of an animal of a different species, the gravest consequences may be expected; no matter how small the injected dose may be, it is absolutely impossible to guard against the passage of the microzymas proper to the animal whose juice is being inoculated into the body of the injectee. But the danger thus indicated is greatly enhanced when the injected ferment is not only that of a different species, but is even pathogenic to the vaccinifer. Now when an animal is diseased its cells are diseased, and when the cells are diseased, so also are the microzymas of such cells, and Béchamp has clearly proved that the so-called "pathogenic" bacteria are only an evoluted condition of diseased Microzymas.

Here we find a rational explanation of the Syphilitic appearances of cow-pox inoculation, of Tetanus as a result of vaccination, as also of the many cases of Seropath-foudroyante for which the Bacteriologists have failed to furnish any explanation.

When the foreign, and especially, if diseased, Microzymas enter the blood of the patient, they ~~may multiply therein or in any other of the tissues of their host and may overcome the resistance which the proper ferments of the patient may offer to their toxicity.~~ into which they are introduced, which in turn diseases the medium the microzymas of the patient and produce toxic ferments. It is probable that the resistance offered by the proper ferments of the blood to

these toxic ferments and to their ptomaines, and the sifting function of the glandular system, a function in great part performed by its ferments, are the main causes why the almost universal inoculation of the vaccinating nations with morbid organic fluids, which has now been carried on for more than one hundred and fifty years, (33) # has not produced results even more serious than those which actually have happened. Be that as it may, it is now easy to see that if the foreign ferments ~~get~~ or if native ferments diseased by their diseased medium get into the blood stream they may proceed along with it, and either set up a general blood poisoning, as has so often happened, with symptoms often resembling Syphilis so closely that the most accomplished Syphilographers are unable to distinguish them; or they may reach a nerve centre. If here arrested, they may set up their fermentive process, if in the spinal chord, Tetanus or Paralysis of a limb or other organ may be produced. If in the medulla, paralysis or spinal menengitis or both, if at a nerve centre in the brain, not only tetanus but any form of brain disease may be produced.

That these affections have been among the results of vaccination can no longer be denied. Béchamp's discoveries furnish a theory for their explanation so consistent in all its parts and so clearly reconcileable with all the observed facts as to render its acceptance by the entire profession a mere matter of time. The only difficulty in the way being the superstitious beliefs of the Jennerian-Pasteur Schools and the enormous pecuniary interests which have been erected upon them.

Again the more rapid cell growth of the bovine race as compared with that of man, may by means of its inoculated Microzymas be imparted to some part of the tissues of the vaccinee, may be held in suspense for an uncertain period, and on the occurrence of some exciting cause may set up the process called Cancer, which has long been recognized as due to abnormal, excessive cell-growth at some particular spot. Here then we find an explanation of the enormous increase of Cancer and cancerous affections among the vaccinating nations.

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(33) # Eighty years of variolous inoculation preceded the Syphilitic inoculations inaugurated by Jenner.

94 2-5a 104 305

In the British Medical Journal for May 29, I897, (vol I) p. I347, Mr. F. G. Gardner, M.R.C.S. reports a case of granuloma following vaccination with calf-lymph. Inoculations were made in four places. He says:

"Two of the places "took" naturally, but the course of the others was unusual from the first. In a day or two, painful red, flattened papules began to form, and grew rather rapidly, and in twelve days from the insertion of the lymph, the condition was as follows:- There were two natural well formed vesicles, and two red, glazed masses, very much like pieces of cock's comb, on the arm, quite one eighth of an inch in thickness, and as large as a shilling in area. There was little surrounding inflammation or induration, but a good deal of pain was complained of. Discharge, which was watery, was very consid-

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Dr. F. G. Gardner of Warwick (England) has been kind enough to reply to an inquiry sent to him touching the later condition of his patient, and by a note dated Oct. 1902, he informs me that the sequel "was quite ordinary and uneventful. The granulations all subsided, leaving ordinary but rather puckered scars. There was no suspicion of cancer at any time: I have not seen the patient for a long time, but I heard of her so recently as yesterday as quite well. I have had several cases like this in a modified degree, but never one nearly so marked."

I desire to take this opportunity of thanking Dr. Gardner for his courtesy to a stranger inquiring in the sole interest of science and humanity. I hope Dr. Gardner will be able to keep his patient under observation for many years. I fear the results of the vaccination are by no means over, and that the patient will hear from them in the future. M.R.L.

"I am at a loss to describe the condition, and several medical friends who saw it, including a surgeon in a large hospital, were unable to give it a name."

Mr. Gardner gives some further details emphasizing his confession of ignorance; and I would like to call his attention and that of all physicians to this verification of the prevision of Mosely, Birch and others of the early opponents of vaccination that the introduction into the human system of the diseased products of the bovine race would produce new and strange diseases in man.

Throughout this work numerous illustrations of the fulfilment of this forecast have been, and will be given.

Of the flattering forecasts of Jenner and his past and present followers, not one single one has been fulfilled!

At the meeting of the Dermatological Society of London, IO Jan: I900, Dr E. Graham Little showed a case of lupus vulgaris affecting the site of vaccination.

"The patient, Rosie G. of German-Jewish parentage, born Dec. I89_, was vaccinated April, I892 with calf-lymph in four places on the left arm above the insertion of the deltoid. The upper

94 104

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The treatment given was, as is evident, directed only to the eruption; the constitutional condition--the "permanent morbid state of the blood" remains, and cannot fail to give further trouble.

Mr. Gardner continues:

"I am at a loss to know what to call this condition, and several medical friends who saw it, including a surgeon in a large hospital, were unable to give it a name."

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two scabs fell off in a short time and the wounds healed;but the lower places never healed perfectly,(perfectly! i.e.the wounds did not heal,)and within six weeks from time of vaccination"pimples"developed in the site of the lower scabs,and insensibly passed into a large red sore,as XXXXXXX seen at present.

This became larger very slowly,and seems to have discharged "offensive matter"at intervals up to twelve months ago,since which it has been perfectly dry.....The surface of the patch of lupus is much fissured,and somewhat unusually scaly.(That is it would seem, ~~unusually~~ XXXX even for lupus--another instance of a "new and strange disease".) There are three nodules of more recent origin at the margin of the main patch,but separated from it by healthy skin. There are two moderately enlarged glands in the left axilla. There are no signs of tuberculosis elsewhere,no history of tuberculosis. One child died at 3 years of bronchitis,having been treated at a hospital for four or five months. Allthe other children-six in number,are healthy.

This case was further reported by Mr.E.Grahan Little in the No. for March,I90I of the British Mournal of Dermatology,pp.80-93.

The calf-lymph employed had been treated in the most recent approved manner with glycerineXXXX,and was quite fresh--certainly less than forty-eight hours old,and besides the brother mentioned above as having died of bronchitis,one other child was operated on at Great Ormond St.in August,I900 for a mastoid swelling. There can be no XXXXXX reasonable doubt but that this child also had been vaccinated. Atlas,plate fig. is a copy of the plate illustrating Dr.Little's further report as above.

Dr.Little reports his opinion that "the lupus was inoculated by the vaccinator,the vaccineX,or other outside agency before the end of the eruption of vaccinia" and narrates a number of cases of tuberculosis following ~~=~~ circumcision;but it is distinctly stated this child's parents were Jews(not Mohammedans,who do circumcise their female children at about puberty)and as Jewish girls are never circumcised,this suggestion falls at once.

Dr.Little quoted(from the Annales de Derm:et de Syph:,I889,p. 576)Dr.Besnier,who reported a case of vaccinal lupus in a young man aged I8 years."The eruption had existed since vaccination at the age of I year-no tuberculosis in family."

92 Kayser reported a case of lupus of left arm in site of vaccination,and of a co-existent lupus of the lobe of the left ear.

The patient,Emily Kampe,was I3 years old when seen by Kayser.

The sores were reported by the mother to have existed since the age of 6 months, and to have developed at the same time and in connection with vaccination, beginning as small nodules which constantly grew larger. The child who had furnished the lymph was traced, and was in robust health.

Dr. Colcott Fox furnished Dr. Little a number of cases which Dr. Little quotes:

Case I. A female infant exhibited to the Dermatological Society, Nov. 9, 1892, suffering from lupus vulgaris occupying the site of one vaccination scar, and a multitude of tuberculosis lesions. Mother stated that the child was perfectly healthy until vaccinated, and that there was no tuberculosis in the family. The patch of lupus in the vaccination scar was observed soon after the pustules healed. It was followed after some months by scrofulo-tuberculous gummata of the scalp perforating the skull and by others on the limbs; by adenopathies, osseous lesions, dactylitis, and finally by meningitis and an acneiform eruption of the thighs.

Case II. Albert D. aged 15 months, seen at the children's Hospital Nov. 13, 1894. Vaccinated in 5 places when 3 months old. Child said to be quite healthy up to vaccination. The lowest vaccinal inoculation left behind a red patch occupying nearly the whole scar-area, and this remained unaltered until I saw the child. I diagnosed lupus vulgaris. One month later a tuberculoma appeared on the left thigh, and others, scrofulo-tuberculous gummata or cold abscesses, continued to evolve here and there about the limbs, especially the lower extremities.

Dr. Fox says: "The lesions were scraped and excised and the child did well"; but with positiveness fortified by the fulfilment of the forecasts of Mosely and Birch, I assert that that child, even though he grow to manhood, will be sickly and will perish long before the three score and ten allotted him by scripture.

CASE III. Wm. C. aged one year, seen at Westminster Hospital April 1898, suffering from cold tuberculous abscesses of the skin, and lupus vulgaris of two of the vaccination scars.

The child had been perfectly healthy until vaccinated at the age of four months in 5 places "by a highly competent and experienced vaccinator." When taken to the operator on the 8th day the arm was very bad. The sores did not heal for a long time and finally 'red patches' were left in two of the scars. In April, 1898 the child was peevish, sweating freely day and night. In two of the vaccination scars, a chronic red scaly infiltration, occupying nearly all the inner scar-area, was observed, and diagnosed as lupus vulgaris. The first scrofulo-tuberculous gummata appeared under the left arm, near the vaccination scars. This was followed by one on sole of left foot, on dorsum of left great toe and over the metatarsal bone of the next toe just below the left knee, inside the left knee, outside

the right knee, on the left buttock, the occiput, and there were one or two smaller ones on the limbs; but as late as October following, another abscess appeared and was removed. Family history good.

Plate XXVII, fig. 4 is the portrait of Edward, son of Anthony Jarron. Healthy until vaccinated; family healthy. No cancer or other constitutional taint known in the family, two grandparents on the father's side lived to be over one hundred years old. The vaccination sores refused to heal; they continued to discharge a yellow matter. A surgeon prescribed an ointment, and the sores healed, leaving a little red speck. After the arm healed cancer appeared in one eye within six months from the vaccination. The eye was extracted. Then in a little while the other eye became affected and was also excised.

after dreadful suffering

After that it spread all over his head. He died at the age of two years and five months. The portrait was taken a fortnight before he died. (Fourth report, Royal (Br.) Commission, 1889, Q.14,341 etc.)

In "La Semaine Medicale of the 26th. of February, 1902, is a report of a session of the Biological section of the Medical Academy of Paris held on the 22nd. of Feb. 1902. At this session there was read a paper by Messrs. F.J.&.E. Bos~~c~~ (of Montpellier) upon the lesions of the Vaccinal infection and their histogenesis." ~~This~~ Certain portions of the paper seems to me to bear so directly upon the view I have put forward at divers times with regard to the progress of Vaccinal-cancer, as well as of the production of Tuberculosis by vaccination that I give here a translation of ~~the article~~ the passages referred to as it appears in the "Semaine Medicale."

> "There are found in the lesions of the vaccinal infection the character which distinguishes a certain number of virulent diseases having the clavelée as type, as for instance the existence of a process of hypertrophy and of proliferation both intense and disorderly. It is thus that the cutaneous pustule is characterized by the proliferation and hypertrophy of the Malpighien epithelium, of the cellules of the sebacious glands, and in short of the conjunctivial cellules of the derma and of the sub-cutaneous cellular tissue. So too after the injection of "pure vaccine" into the Trachea, we find, on the seventh day, hard nodules disseminated in large numbers in the lung and presenting the characters of pulmonary clavelar lesions. Histological examination shows an immense proliferation of cellules having an epithelial appearance in collosal hypertrophy and completely disordered, disposed in great sheets wherein the pulmonary structure has completely disappeared."

The causes of Sero-path-foudroyante are more complicated; they probably arise in the following manner. As each species of plant and animal has its own special Microzymas, (as shown by Béchamp and his associates), when these foreign ferments ~~proliferate~~ are introduced into the blood or other tissues, they may produce the deadly Coneine by withdrawing the constituents of water from the partially oxidized Hydrocarbons of Gelatine and Ammonia, which exist in the body at all times; or the foreign ferment may set free from their various compounds in the body, the Carbon, Nitrogen and Hydrogen always there present; and these coming together at the moment of liberation, i.e. in what is termed the 'nascent state' may at once form the yet more deadly Hydrocyanic Acid. Seropath-foudroyante may also result from the foreign or diseased ferment producung a clot in

Note to page 109 - 110

Several matters deserve notice in Dr:Wilson's graphic descriptions of the cases quoted in the text.

First:His own mental state:

He was so obsessed by the practice of the vaccine rite that he even fell into a misuse of the language of which he was a master, and termed that natural which was most unnatural, except as nature's reaction against the violence done her; usual was what Dr: Wilson really meant.

But the most important thing to be considered is the mental and moral disorganization affected in such a mind as Dr:Wilson's by the "custom" of vaccination. Not one word does this great physician utter for the with regard to the sufferings of the child Green, or of the infant whom he had the "opportunity" of seeing done to death as he described, of those of the parents of those children! Not one word of reproof for this most unjustifiable experimenting with the health and lives of the children and of other vaccinees, which has been and is the constant practice of all vaccinators. And able physician and pathologist though he was, he fails to realize that the child Green's condition was one of deep-seated permanent injury; and though it is possible that it may have ~~seemed~~ seemed to recover, (Dr:Wilson does not state how this was) its vitality was irretrievably reduced to an extent which neither he nor any physician could measure nor the consequences to that child foretell.

As to the experiments which Dr:Wilson quoted from the "Archives de Medicine without comment, I solemnly protest against such nefarious proceedings in the name of every true physician and of the Healing Art!

The only proper function of the physician is to heal the sick - to slaughter or to make sick is the function of the executioner among barbarous or semi-civilized peoples only.

the heart.

Erasmus Wilson,in his work on skin diseases,under the head of"Secondary eruptions of Vaccinia,"p.129,describes the following cases:

"--Green,a child of eighteen months, was vaccinated at the London smallpox hospital on Monday June 7th:1841. On the ninth or tenth day after the operation an eruption of red spots was perceived upon the forehead,which quickly extended to the face,neck,trunk and arms, by the thirteenth day were dispersed over the whole of those regions the redness being augmented towards evening and during the night.

On the sixteenth day I saw the patient,the vaccine crust and areola were natural,the eruption had subsided on the face,and was now principally confined to the arms,the chest back and legs being nearly free

In these situations it existed in its successive stages; there were small red spots-the earlies form of the affection-and and larger patches of a roundish or irregular form of about the size of a fourpenny piece, (about 5/16 of an inch),several of these latter patches being congregated here and there so as to form clusters of considerable size.( )

The margins of the patches were of a dull red color and somewhat elevated,while the centres presented a yellowish tinge,and in some situations were covered with numerous small vesicles containing a limpid and transparent serum. On the eighteenth day the redness of the patches was declining,their raised border had become lighter in tint than the centre,and the epiderma was desquamating over their surface,particularly on those parches where vesicles had existed//

On the face,the vesicles terminated in thin bronish and spongy laminae. In the early part of the present year (1847)I had an opportunity.....of seeing an infant in whom the secondary eruption of vaccinia was so severe as to be the cause of death. The eruption commenced upon the head,and face and thence extended to the neck and chest. On the latter there were more than one hundred vesicles,presenting the characteristic flattened and umbilicated form of the vaccine pock. They were for the most part discrete,but every here and there were confluent clusters of three,four and five. On the neck the vesicles were confluent,the slight and irregular intervals of the skin between the large patches were visibly red,and the whole surface poured out an abundant ichorous discharge....."

He also quoted a case from the "Archives de Medicine"for September 1841. In that case an infant one week old was vaccinated July 3rd: On the 10th: several papulae appeared on various parts of the body// On the 15th:, thirteenth day after vaccination, there were

eleven umbilicated vesicles on the abdomen and legs, similar to those of vaccinia. Three children inoculated with lymph from this eruption had vesicles developed identical with those of ordinary vaccinia. # Dr. Wilson also quoted Dr. George Gregory as having "lately communicated to the Royal Medical and Chirugical Society the case of a child in whom Petechiae appeared upon the skin four days after vaccination. The child to all appearance had been in perfect health. The areola was occupied on the eighth day by an extensive ecchymosis, and the body was covered by petechial spots. By the sixteenth day, the petechiae had commenced to fade."

The reader who has perused the brief outline of the grand discoveries of Béchamp heretofore given, will not be at a loss to understand the cases of Septicaemia which have followed upon vaccination, as most probably, nay almost certainly due to that essentially septic process, and when that condition has followed closely upon the operation and no evidence of septic infection other than the vaccination can be adduced, the denial of the relation of cause to effect between them and the attempt to allege that some other imaginary infection may have taken place, whereof no tittle of evidence can be adduced, can be ascribed only to that form of intellectual dishonesty which so frequently accompanies bigotry and superstition. Several cases of such septicaemia immediately following vaccination were proved before the Royal (Br.) Comm. of 1889 in many of which the official physicians sought to ascribe the septicaemia to imagined possible infection, denying that the proved septic inoculation had anything to do with it; and this 'shuffle' has been constantly resorted to by the official doctors in the United States.

The two following cases are quoted from "The Liberator" March 1903

E.M.A. Was vaccinated about a week later became fretful and restless, but the doctor said that the arm was going on 'beautifully.' At the end of another week the child's mother observed a swelling on the Labia Majora, which the doctor pronounced an abscess. Then a redness appeared upon the hip, which ex-tended down the thighs and legs to the feet which became swollen to

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This most unjustifiable experimenting with the health and lives of these children is the constant practice of the vaccinists, so that even Dr. Erasmus Wilson passes it bye as of no moment. In the name of the healing art, and of every true physician I enter my most solemn protest against such nefarious deeds. The only proper function of the physician

is TO CURE. To kill is the function of the executioner.

twice their natural size. The doctor persisted, in reply to the mother's anxious inquiries, that there was no danger. Death occurred after terrible suffering, six weeks after the vaccination, which had been performed with "pure calf lymph".

M. K. On the fifth day the vaccination appeared not to have taken. On the fifteenth day the vesicles had become inflamed, and a large bulla formed which included the three vesicles, which later sloughed into one with much loss of tissue, but no enlargement of neighboring glands. Death took place on the twenty-fourth day after vaccination. After death the arm is said to have resembled the woodcut on p.104 of "Archives of Surgery" Vol. I., No.2, see post p. Atlas, Plate XXVIII, Fig. 4.

This case is of interest as illustrating that cases in which it is said that the vaccination "did not take" are ~~really more~~ as a class suspicious of danger than those in which it has "taken". In those cases in which the vaccination "takes", the interpretation is, that Nature, in her revolt against the introduction of the poison into the blood has set to work to get rid of it through the vaccine ulcer. Where it does not "take" any one of the following events may happen.

(1) There may have been no poison on the point or in the tube, whichever may have been used.

(2) The poison, arrested at the nearest packet of glands, may have become "incapsulated" and may remain innocous for many years, # until any of the many accidents of life, mental worry, overwork, lack of proper food, a shock, a blow, a chill, an attack of fever etc., may cause rupture of the capsule, and the inoculated ~~and diseased Microzyma may~~ sepsis

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A striking illustration of this position is reported in "The New York Sun a few days prior to the 23rd. of May, 1902, on which date I wrote to one of the editors for the name and address of the physician attending or reporting the case. This after some search he was able to give me, but promised to watch for its report in the Medical Press and inform me. The report in the "Sun" is as follows:

"ODDEST VACCINATION CASE.

Little girl carried it latent for two years - Then it took.

The remarkable case of a small girl whose vaccination took after two years delay should be some consolation to those who have got over it quickly. The case has been reported to one of the medical journals by the child's physician and is recorded as being probably without precedent in medical science. The child was vaccinated when she was only six months old and with very slight success. Nothing was thought about that until a few weeks ago, and two years after the original vaccination she had an attack of scarlet fever with complications which puzzled the family doctor. The old vaccination marks seemed to wake up again. Inquiry revealed the fact that the little girl had not been revaccinated, though all the symptoms might have indicated that she had. Other physicians were called in and watched the case. When the child's recovery was certain they agreed that the one explanation feasible was that the vaccination had remained latent in the child's system for two years and that the fever had started it afresh."

may start upon its passage into the life-stream, and produce Septicaemia, Pyaemia, Tuberculosis, Cancer, Leprosy, Nephritis or, as its least serious expression, Small-pox. Tetanus

(3) Avoiding a packet of glands, the poison may enter the Life-stream and produce Vaccinia-foudroyante as above explained or Pyaemia or Septicaemia, as in the case of M. K. indicating itself or not, at the place of insertion of the poison.

(4) After remaining latent for ~~some~~ any length of time, the virus may enter into chemical combination with one or more of the juices of the body and be deposited in one or other of the tissues. It has been demonstrated that uric acid may be so deposited even when it, or food substances capable of producing it are ingested ("Uric acid in the Causation of disease", Haig 6th Ed: 1903) and many of the clinical histories given in this work serve to illustrate the phenomenon mentioned in this section (more particularly the case of Mrs McC and of her child; vide p)

(5) The failure of the vaccine virus to produce its usual effects may be due to the low vitality of the patient, rendering him unable to throw off the poison by means of an abscess; in such cases the "accident" mentioned above are more liable to happen than when the vaccination has "taken".

Mention has ~~already~~ been made of Mr Cecil's cases of cowpox inoculation producing an eruption resembling Erythema. A description of this condition as a secondary of Syphilis will be found on p 588 of Keyes' work entitled "Genito-Urinary diseases with Syphilis"

chap XII

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Reference has also been made (supra p. chapter II) to the case of Rebecca Latchfield. It was described by Mr Rogers in his pamphlet before cited as follows:

"Rebecca Latchfield... subject of the print annexed, (Atlas, Plate XXVIII., Fig. 1) was vaccinated when five months old, and the arms proceeded in the usual manner: after about a month a pimple was observed in the middle of her forehead, which was succeeded by several in the arms; first they felt like peas, they gradually increased in size and more appeared in the skin on different parts of the body. The child was carried to a surgeon when about twelve months old; he purged it with calomel and directed the tincture of bark. As its health improved the knobs advanced to suppuration; that on the body first maturated, and was opened; some on the arms slowly followed. The plate is made from a drawing of one arm only, as the whole subject would appear disgusting; but this case, I think, clearly demonstrates a new disease of the skin, not at all similar to scrofula, or any other disease I am acquainted with."

Mr Birch in his replies to the queries addressed to him by the Royal Coll: of Surgeons published by him in 1807 states in a note on p. 11 of this unfortunate child "She lost the sight of one eye this year"

None can prefice the gruesome consequences which may flow from inoculating organic and still worse organized poisons upon human veins and still less where they will end. That this case ended in the death of the victim after protracted torture cannot be doubted

In his third letter to the "Medical Gazette" dated Bristol, February first, 1839, (Vol. XXIII., 1838-9, p. 707) Mr. Estlin states that Messrs. Mitchell and Pranckard of Longport, in their vaccinations with

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This is to be regretted, Mr. Rogers was too delicate of public squeamishness. If the "disgusting" appearances could be inflicted upon this helpless child without subjecting the perpetrator to penal consequences at least clearest and the fullest possible picture thereof should have been presented to the world for its enlightenment. Considering the disease in this case to be of a cancerous character I have had made a copy of Mr Rogers's drawing and placed it with other illustrations of cases as a result of vaccination.

his lymph had four cases (out of sixty-eight) of Erythematous eruptions of a violent character, one of which ended in death. Every physician knows that Erythema is a frequent secondary of syphilis.

In the same letter he mentions "severe inflammation and ulceration in the arm" as having happened at Bristol from the use of his "lymph". He also admits (see his third letter) that out of 68 cases there were:

1 of severe erysipelas,

4 of Erythematous eruptions of a violent character,

2 highly inflamed arms

or seven cases of severe sickness with one death out of 68 cases, or 10.3 per cent of sickness instead of the one per cent of "bad arms" in Dr. Cory's practice, and very nearly six deaths out of 4000 instead of the one confessed by Dr. Cory, or 206 out of 14,000 instead of the one admitted by vaccinating officials; this "confession" gives much more nearly the real fatality of ordinary vaccination than any of the figures given by official authority.

The following narratives has been obtained for me by Mr. J. B. Boutier of England, partly from the child's mother, partly from the records of University College Hospital, Gower St.

Kate S- aged ten months; was brought to the University College Hospital November 6th, 1892. Had been vaccinated October 16th. An eruption commenced on the evening of the 23rd. It was distributed over the arms and the lower limbs where the lesions were separate, they were dull or bright red flat papules, in size from a pin's head to a quarter of an inch in diameter, the larger papules showed signs of dying out in the centre and enlarging at the periphery. See Plate fig.

Vaccination is a frequent cause of exciting into activity unsuspected diseased conditions: Thomas Norther aged 35, a proof reader, he always seemed in good health and was employed

by Messrs. Shaw and Sons Fetter Lane, London. The employees were required to be vaccinated or be discharged; he submitted and his wife said from the day of his vaccination he was never well. He was found dying in Fleet Street and an autopsy revealed ananeurism of the aorta never before suspected.

The Morning Leader (London) on Sept. 6th, 1902 reported the case of Harvey Laurence Thorpe, a child of three months and two weeks who died as the result of vaccination. The death was acknowledged by an honest doctor and is recorded in the return of the Registrar-General. The death took place 34 hours after the vaccination. I ~~have~~ procured a copy of the death certificate and some additional details through the kindness of Mr. John H. Bonner and as the honest doctor should be known, I give his name Mr. Arthur Jones L. R. C. S.I. His residence I cannot give, ~~but~~ except that it must be near the Old Kent Road, London All honor and prosperity to him;

Insert "From The Vaccination Inquirer" as a par. says Coroner has seen

in the Old Kent Road from the residence of the parents of the victim. On the 3rd of the visit on the 30th August the Public vaccinator called and vaccinated him. The child became ill towards night and died the following night at ten o'clock.

Insert 114

Bronchno-pneumonia and pleurisy ~~caused~~ by vaccination." I have procured a copy of the Certificate of death.

Dr. H. L. Browne the public vaccinator at the request of the guardians of West Bromwich reported the case of Gertrude Hulse. She was vaccinated by Dr. Plummer, deputy to Dr. Browne with the "lymph" of the ~~Local~~ government board on the 15th August 1902. Inspected August 20 and again on mother's request on the 29th on account of inflammation. The mother stated the child had been well up to the time of vaccination, but at end of second week thereafter inflammation showed itself from shoulder to elbow, child became torpid and weak and died Sept. 7th. Certificate of death signed by a doctor other than the vaccinator gives for cause of death "Vaccination, Asthemic inflammation, Debility. N. L. U. Somers L and L. M. R. C. S. I hold a copy of the Certificate of death.

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(Insert) From "The Vaccination Inquirer" for February 1904 we have the following; Ivy Alice Mosley 5 months old of 135 Ruskin Avenue Manor Park. There was an inquest and in spite of the Coroner the Jury insisted on rendering a verdict of "Broncho-pneumonia and pleurisy accelerated by vaccination." I have procured a copy of the Certificate of death.

Dr. H. L. Browne the public vaccinator at the request of the guardians of West Bromwich reported the case of Gertrude Hulse. She was vaccinated by Dr. Plummer, deputy to Dr. Browne with the "lymph" of the Local government board on the 15th August 1902. Inspected August 20 and again on mother's request on the 29th on account of inflammation. The mother stated the child had been well up to the time of vaccination, but at end of second week thereafter inflammation showed itself from shoulder to elbow, child became torpid and weak and died Sept. 7th. Certificate of death signed by a doctor other than the vaccinator gives for cause of death "Vaccination, Asthemic inflammation, Debility. N. L. U. Somers L and L. M. R. C. S. I hold a copy of the Certificate of death.

Ps 4 Is a portrait of the arch of

ador, the foreign Ambassadors and ministers in Washington were uniformly ready to give me every assistance in that direction; but from that date, with an apparent concert, the reply made to every application for documents or information was to inform me that any application of the kind must be made through the U. S. Ambassadors at the various courts. With the exception of one application made direct to Mr. Choate when he was Depew and which was courteously responded to by his attaché, our Ambassador at the Court of St. James, the answer to all such applications, was a direction I was directed to apply to the Secretary of State at Washington and that if he gave authority for it, the information sought, would be cheerfully applied for.

Application to the Secretary of State met with various and wholly inconsistent treatment, on one occasion through the courtesy of Secretary Hay and of the Ambassador and Consul General to Austria the fullest aid in their power was given, as is noted in Chapter XIX of this work; at others still emanating from the department of the Secretary of State, ~~all~~ such assistance has been refused.

One illustration will suffice:

I invariably explained the character of the work upon which I was engaged and the public utility of the information sought to be attained by procuring it. On the 5th. May, 1905 I applied to Secretary Hay to procure for me information as to the vaccine manufactured in Bavaria and especially as to its origin and pedigree, ~~in Bavaria~~ and the official statistics or a summary thereof of small-pox, and vaccination for a period of about 50 years in Bavaria and France, and of diphtheria and Rabies in both countries:- the reply was that the Department was unable to assist me.

Not satisfied with this I endeavored to pass over the head of the third assistant secretary of State by sending his letter with a repetition of my application and an explanation of the public benefit to be served, direct to Secretary Hay in an envelope marked personal, and to this I received the following reply: